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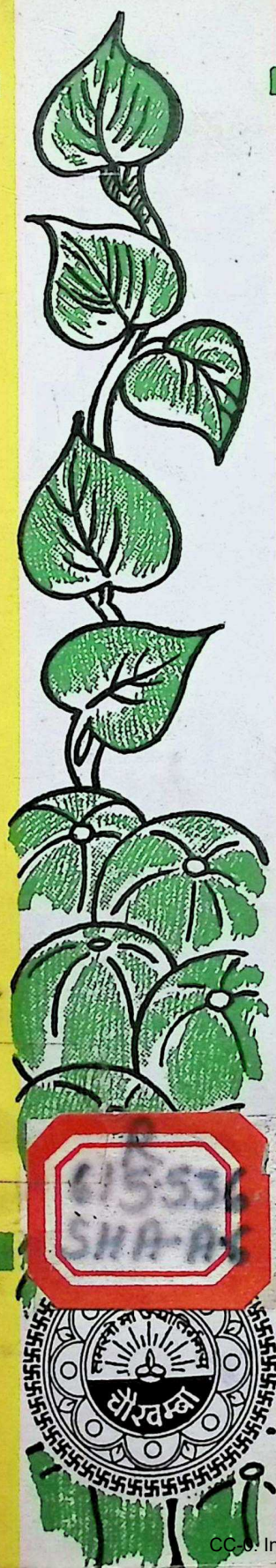

CARAKA SAṂHITĀ

[TEXT WITH ENGLISH TRANSLATION & CRITICAL EXPOSITION BASED ON CAKRAPĀṆI DATTA'S ĀYURVEDA DĪPIKĀ]

VOL. VI

By:- R.K. SHARMA
BHAGWAN DASH

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About the Book :

The Caraka Saṃhitā occupies a very important place in the History of world's medical science. But this work is quit difficult to understand to those who are not well accustomed with the particular style of Sanskrit in which it is written. Hence, an authentic translation was a desideratum.

The present translation is not only the result of painful labour of two renowned scholars, but it comprises valuable extracts from the famous Commentary of Cakrapāṇidatta, rendered into English.

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V-VI

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Stock Verification-2024

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AGNIVEŚA'S
CARAKA SAṂHITĀ

Text with English Translation & Critical Exposition
Based on
(CAKRAPĀṆI DATTA'S ĀYURVEDADĪPIKĀ)

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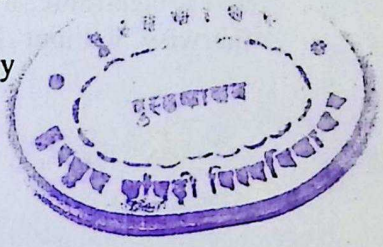

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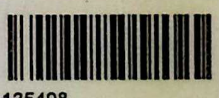

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Publisher : Chowkhamba Sanskrit Series Office, Varanasi-1
Printer : Chowkhamba Press, Varanasi-1
Edition : 1st, 2001

ISBN : 81-7080-051-X

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PREFACE

We are happy to present before our esteemed readers the sixth volume of *Caraka-saṁhitā* with its English translation and notes in English based on the commentary of its master commentator *Cakrapāṇidatta*. This volume includes the last two sections, viz., *Kalpa-sthāna* and *Siddhi-sthāna* of *Caraka-saṃhitā*.

In *Suśruta-saṃhitā*, the *Kalpa-sthāna* deals with various types of poisons and recipes for their treatment. But in *Caraka-saṃhitā*, this section deals with different types of recipes of important drugs for emetic and purgation therapies. In addition, this section deals with the methods of selection and administration of these recipes. For the preparation of these recipes, drugs are to be added in specific quantities. For this purpose, the weights and measures used in āyurveda, and different rules for using these drugs are also described.

In *Siddhi*-section, methods of administering five specialised therapies, which are called *pañca-karma* in āyurvedic parlance are described. Persons suitable and unsuitable for these therapies, recipes to be used for different types of *basti* (medicated enema), the size and shape of the instrument to be used, complications arising out of the administration of *pañca-karma* therapy and their management are also described. In addition, diseases of three vital organs, viz., heart, head and urinary bladder, and their treatment are described in this section.

Pañca-karma therapy has to be administered in specific seasons. But there are recipes which can be used in all seasons for the rejuvenation of the body. The medicated enema-therapy of this type is called *yāpana-basti*. Different recipes to be used for this type of *basti* (medicated enema) are also described here. In addition, the implications of logical terms used in scholarly debates *(tantra-yuktis)* are also explained.

At the end, Dṛḍhabala has explained the role of a redactor *(saṃskartā)*. In addltion to giving his geneology, he has made it clear that seventeen chapters of *Cikitsā-section,* and the *kalpa* as well as *Siddhi*-sections in their entirety were supplemented by him by collecting material from different texts which were then extant because this portion of original *Caraka-Saṃhitā* was not then available.

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The original text of *Agniveśa-saṃhitā* was composed perhaps 2000 years before Christ. It was redacted by Caraka during seventh century before Christ. Because of significant contribution made by Caraka, this text was later known as *Caraka-saṃhitā* (after the name of the redactor), in the place of *Agniveśa-saṃhiā*. Because of vicissitudes of time, almost one-third of this important text became extinct. In fourth Century A.D., Dṛḍhabala himself, the texts of these supplemented sections were compiled from other texts, the readers may find some repetitions and unsystematic arrangements. Nontheless these are the two important sections from therapeutic point of view. As has been stated by Dṛḍhabala himself (*Siddhi* 1:40), *basti* (medicated enema) therapy constitutes half of the therapeutic measures and according to some, *basti* itself constitutes the entire āyurvedic therapeutics.

In spite of phenomenal progress in medical science, large number of patients suffer because of inadequacy of the so called scientific therapies. Not only that, many patients suffer because of the adverse effects of present day therapies which are called iatrogenic diseases. Because of economic development, the span of life is increasing. This has given rise to many old people in the society, most of whom are invalid and dependant upon doctors and hospitals for the sustenance of their life. Āyurveda doesn't accept this type of society. Death is eternal truth, and nobody has escaped it. But till death, one should have perfect senses and a person with his accumulated experience should be able to render assistance to his family, society and state. A person in old age should be an asset to the society, and not a liability as it happens today. This has been summed up in the vedic prayer :

"*Pasyema śaradaḥ śatam,*
Jīvema śaradaḥ śatam,
Śṛṇuyāma śaradaḥ śatam,
Prabravāma śaradaḥ śatam,
Adīnāḥ syāma śaradaḥ śatam,
Bhūyaśca śaradaḥ śatāt".

We hope, this work *Caraka-Saṃhitā,* especially the present last Volume of it, will be of great interest and utility to the scientists, doctors and research workers. This will help in the mitigation of miseries of suffering humanity.

Nāgārjuna, the Buddist philosopher and founder of Āyurvedic *Rasa-śāstra* in the epilogue of his illustrious work "*Yoga-śataka*" has stated as follow :

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"Guṇādhikaṃ yogaśataṃ nibadhya
Prāptaṃ mayā puṇyamanuttamaṃ yat
Nānāprakārāmaya-nīḍa-bhūtaṃ
Kṛtsnam jagat tena bhavatvarogam"

"With the unsurpassable *puṇya* (merits) acrued to me by the composition of the work containing one hundred recipes of excellent therapeutic efficacy, let all the creatures of the entire world who are the abodes (*nīḍa*=nest) of different types of maladies be free from their miseries."

We reciprocate the above mentioned sentiments of Nāgārjuna. Our official jobs had no scope for this type of academic activity. Therefore, this arduous work was undertaken after midnight for love of labour. We will be amply rewarded if the fundamental principles and guidance for putting them into practice enshrined in this work are used for mitigating the miseries of suffering humanity.

Ram Karan Sharma
Bhagwan Dash

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ACKNOWLEDGEMENT

In the preparation of all the volumes, we have received consistent and considerable help from Ku. Kanchan Gupta, M.A., M.Ed. and Shri Satish Kumar Sharma. We pray Lord Dhanvantari to bless them for their prosperous career as well as a happy and healthy life.

Ms. Chaukhamba Sanskrit Series Office have taken great pains to publish this work for which we pray almighty to bless them with good health and happiness.

Ram Karan Sharma
Bhagwan Dash

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INTRODUCTION

A healthy person is defined in Āyurveda as the one who has equilibrium of *doṣas* (three entities regulating the functions of the body and the mind), *dhātus* (seven categories of tissue elements constituting the matrix of the body), *malas* (byproducts of digestion and metabolism which are partially used for the sustenance of the body-matrix, and generally eliminated through stool, urine, sweat, etc.) and *agnis* (enzymes responsible for digestion and metabolism), who is spiritually elevated, who has optimum functioning of senses as well as sense organs, and who enjoys happiness of mind.

The *doṣas* are three in number, viz., *vāyu, pitta* and *kapha. Vāyu* regulates all the movements and sensations in the body. *Pitta* regulates all the digestive and metabolic activities; and *kapha* is responsible for creating compactness and lubrication of the tissues in the body. In addition, they regulate the activities of the mind *(manas).* These *doṣas* have three different aspects, viz.:

1. **Subtle aspect** through which they regulate the functions of mental activities;
2. **Gross aspect** through which they regulate the activities of visceras and different other organs of the body; and
3. **Morbid aspect** which is thrown out of the body. If these morbid *doṣas* are not taken out of the body, they cause diseases and decay (ageing) in the body. Morbidity of the *doṣas* may be caused by natural forces, viz., ageing process, seasonal changes, etc., or by unnatural and unwholesome food, drinks and regimens. Because of these natural and unnatural factors, the *agnis* (enzymes responsible for digestion and metabolism stop functioning as a result of which *āma* (uncooked material) is produced. This *āma* (uncooked material) gets mixed up with the *doṣas* to cause different mobidities. The body has the capacity as a result of living force (*prāṇa*) to counteract these mobidities if they are within the limit. If this limit is crossed, then a person suffers from diseases, decay (ageing process) and even death.

Dhātus or tissue-elements are divided into seven categories, viz.:

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1. *rasa* (plasma, including lymph and chyle);
2. *rakta* (haemoglobin fraction of red blood cells);
3. *māṃsa* (muscle tissue and cells composing the structure of different visceras);
4. *medas* (fat tissue including yellow bone-marrow);
5. *asthi* (bone tissue including cartilages);
6. *majjā* (red bone-marrow); and
7. *śukra* (sperm in males and ovum in females).

These tissue-elements continue to grow right from embryonic stage till adulthood, and this growth declines during old age. As a part of living process, every moment, parts of these tissue-cells get destroyed. These are replenished by food, drinks, wind, sun-ray, etc., through digestion and metabolism. Till adulthood when these tissues are growing, the replenishment of tissues takes place better in quality and more in quantity, than the loss. In old age, this replenishment takes place less in quantity and inferior in quality of cells. It is this inferior quality and less quantity of replenished tissue cells which cause ageing process; and persons suffer from different types of diseases ultimately leading to death. The process that helps the body to develop, grow and keep it in line during adulthood turns against it. Joints become stiff as their molecular mesh of collagen tightens. Most cells stop dividing. Free radicals are continuosly produced as the cells go about their daily business of reproduction. These are churned out en masse when the cells come under stress. But the body has a suitable powerful mechanism which acts at the time of stress to keep these free radicals in check. When this process is overcome, free radicals can damage the body which is the characteristic of ageing process. At the end of chromosoms in the cells, there are bits of DNA which are called telometers. As a result of digestion and metabolism of food and drinks, the cells continue their lives dividing; and at each division of cells their telometers become a little shorter. This process continues till the telometers become too short at which point they stop dividing, and then die. The action of free radicals can be kept at a check by intake of anti-oxidants. If these anti-oxidants are supplemented through different therapies, then the cells will continue to grow both in quality and quantity. In āyurvedic parlance, these anti-oxidants are called *ojas* which is considered to be the essence *(tejaś)* of all the tissue-elements. This *ojas* (vital essence) is of two types, viz., *para-ojas* and *apara-ojas*. They get vitiated in three different ways, viz., 1) *vyāpat* (morbidity), 2) *visraṃsana* (displacement),

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and 3) *kṣaya* (diminution). These three defects in *ojas* are caused largely by the intake of toxic material like caffeine, nicotene, heroin and cannabinol, or by excessive sexual indulgence. If these intoxicants are avoided; and suitable therapies are taken, then the *ojas* including anti-oxidants will stop the ageing process. Sustenance of this *ojas* (vital essence) which is aiso called *bala* (immunity) results in *vyādhi-sahatva* (resistance to disease), which has two different aspects, viz., *vyādhi-bala-virodhitva* (attenuating the strength of disease) and *vyādhyutpāda-pratibandhakatva* (prevention of the occurrence of a disease). Maintenance of the equilibrium of the seven categories of tissue-elements, and their essence called *ojas* is the *sine-qua-non* for the preservation and promotion of positive health, and prevention as well as cure of diseases.

During the process of digestion of food and metabolism of *rasa* (nutrient fluid produced after digestion) several byproducts come out. Some of these digestive and metabolic byproducts are utilised by the body, and some others are excreted out of the body through stool, urine, sweat, etc. Formation and excretion of these digestive and metabolic byproducts are again dependent upon thirteen categories of *agnis* (enzymes). If there is any derangement of *agnis* (enzymes), then morbidities are set in these byproducts leading to disease and decay.

There are thirteen categories of *agnis* (enzymes). One important group is located in gastro-intestinal tract, which is responsible for breaking down the molecules of food into smaller absorbable particles. Five groups of these *agnis* (enzymes) are located in the liver which help in the transformation of the heterogenous particles (molecules) into homologous ones. It is only the homologous ones circulating in the blood-stream that can be used by the tissue cells. But before that happens these are required to be acted upon by another seven categories of *agnis* (enzymes), which are called *dhātvagnis* to make the nutrient material assimilable by the tissue-elements.

If there is any morbidity at the stage of *jāṭharāgni* (the group of enzymes in gastro-intestinal tract), *bhūtāgnis* (five groups of enzymes in the liver) and *dhātvagnis* (seven groups of enzymes at the level of tissue-elements), then uncooked material continues to be absorbed and circulate which as a group in ayurvedic parlance is called *āma*. This *āma* being sticky in nature gets lodged in the circulating channels *(srotas)* thereby preventing nourishment of the tissues by the nutrient fluids.

Through these channels *(srotas)* along with the nutrient fluids, three *doṣas* viz., *vāyu, pitta* and *kapha* also circulate. Because of *āma*

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the circulation of *doṣas* gets afflicted. The *āma* continues to get more and more accumulated. This leads to interruption of nourishment to tissues and morbidities in the channels *(kha-vaiguṇya).* If the process continues unabated, then the channels get completely obstructed *(sroto-rodha).* Then the *doṣas* afflicted and mixed with *āma* get accumulated. This stage of accumulation is called *sañcaya,* and this is the site of origin *(udbhava-sthāna)* of a disease.

Doṣas mixed with *āma* get obstructed and accumulated after which they get aggravated which condition is called *prakopa.* Then they start migrating through other colateral channels which condition is called *prasara* (spreading). Then while migrating through the colateral channels, because of association of *āma,* they vitiate the channels themselves *(sroto-duṣṭi).* Then these aggravated *doṣas* mixed with *āma* get lodged in a weaker part of the body (tissues or viscera) which gives rise to a disease. This particular part of the body is called the site of the menifestation of the disease (*roga-adhiṣṭhāna*). Thereafter, the disease takes different shapes. This, in brief, is a pathogenic process of a disease according to ayurveda.

For the treatment of a disease, it is neccessary that the place of the origin of disease *(roga-adhiṣṭhāna),* the channels afflicted by vitiated *(duṣṭa) doṣas (sañcāra-mārga),* and site of manifestation of the disease *(roga-adhiṣṭhāna)* are to be corrected in order to root out the disease. According to ayurveda, this can be done in two different ways, viz., by *saṃśamana* (alleviation therapy) and by *saṃśodhana* (elimination therapy). *Saṃśamana* (alleviation therapy) takes a long time to work, and the disease may even relapse. But if these morbidities are corrected by *saṃśodhana* (elimination therapy), then the cure is quick and there is no more possibility of the relapse of disease. *Pañca-karma* therapy aims at elimination *(saṃśodhana)* of these morbidities for which they are considered to be very vital in ayurvedic therapeutics.

The site of origin of the disease may be in the peripheral tissues *(bāhya roga-mārga),* or in gastro-intestinal tract including abdominal and thorasic visceras *(ābhyantara roga-mārga),* or in vital organs like brain and bones including joints *(marmāsthi-sandhi).* Elimination of morbid *doṣas* can be achieved through sweating, but the most important and convenient way to eliminate is to bring morbid material to gastro-intestinal tract through which it can be conveniently and quickly eliminated through emesis, purgation and medicated enemas. The morbid material from the head can be eliminated by inhalation therapy *(nasya).*

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Āma is a sticky material which remains adhered to the tissues of the channels. It is necessary that stickiness of this *āma* should be loosened, and adherence has to be removed before the morbid material could be eliminated. This is done with the help of oleation *(snehana)* and fomentation *(svedana)* therapies. These are called *pūrva-karmas* (preparatory therapies). Sometimes these two therapies are administered simultaneously followed by massage, by which the morbid material comes out through the sweat. It also helps in rejuvenating the body, and prevents as well as cures several diseases. There are special therapeutic measures called *ṣaṣṭika-taṇḍulābhyaṅga* (rice massage) and *tailābhyaṅga* (massage with warm medicated oil).

At times, massage with warm medicated oil or with rice-boluṣ cooked in the decoction of drugs is confused with *pañca-karma* as a whole. These oleation, fomentation and massage therapies together have their limitations.

The main *pañca-karma* therapy consists of the following :

1. *Vamana* or Emetic therapy;
2. *Virecana* or Purgation therapy;
3. *Nirūha* or Medicated enema with medicated decoction and oil;
4. *Anuvāsana* or Medicated enema therapy with recipes which are composed of medicated ghee, oil, etc.; and
5. *Nasya* or Inhalation therapy.

In different ayurvedic classics, these five main therapies are slightly altered in enumeration inasmuch as *nirūha* and *anuvāsana* types of enema therapies are considered as one *karma* (therapeutic measure) of medicated enema. Blood-letting therapy (*rakta-mokṣaṇa*) is considered to be the fifth therapy in place of *nasya*-therapy.

There are some therapeutic measures subsidiary to *pañca-karma*, like *kavala-graha* and *gaṇḍūṣa* (gargling with the paste or decoction of the drugs), *dhūma-pāna* or smoking therapy, *āścyotana*, *añjana*, *tarpaṇa* and *puṭa-pāka* (application of collyrium or paste of drugs in the eye).

After the administration of each of these elimination therapies,the patient becomes a little weak. Restoration of his strength is important before the next elimination therapy is administered. Mainly consisting of different types of diet, this is called *paścāt-karma* (post-therapeutic measure).

Description of these preparatory therapeutic measures (*pūrva-karma*), main therapeutic measures (*pradhāna-karma*) and post-

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therapeutic measures (*paścāt-karma*) are scattered in Vāgbhaṭa's *Aṣṭāṅga-hṛdaya* (*Sūtra* 15-27, *Kalpa* 1-4) and in *Suśruta-saṃhitā* (*Sūtra* 11-14, 44, 45; *Śārīra* 7-8; and *Cikitsā* 31-40). But in the present *Caraka-saṃhitā* in addition to *Sūtra* 2-4 and 13-16, all descriptions are consolidated in two distinct and different sections called *Kalpa-sthāna* and *Siddhi-sthāna,* and described in great detail. This is the importance of the present volume of *Caraka-saṃhitā.*

At the end, we must admit the possibility of some imperfections that might have crept into these volumes because of the temporal and financial constraints.

"Vidvān eva vijānāti vidvajjana-pariśramam ।
Na hi bandhyā vijānāti gurvīṃ prasavavedanām ॥"

"It is a scholar alone who can appreciate the labour involved in the production of a scholarly work. A barron woman cannot appreciate the serious nature of pain involved during the delivery of a child."

With all the humility at our command, we seek the indulgence of the esteemed scholars and research workers who will use this work. Necessary corrections will be carried out in subsequent editions.

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Romanic Equivalents of Devanāgarī

Devanāgarī		Roman Equivalents
Initial	Medial	
अ	–	a
आ	ा	ā
इ	ि	i
ई	ी	ī
उ	ु	u
ऊ	ू	ū
ऋ	ृ	ṛ
ए	े	e
ऐ	ै	ai
ओ	ो	o
औ	ौ	au
अं	–	aṃ
अः	–	aḥ

Devanāgarī Alphabets	Roman Equivalents	Devanāgarī Alphabets	Roman Equivalents
क	ka	ध	dha
ख	kha	न	na
ग	ga	प	pa
घ	gha	फ	pha
ङ	ṅa	ब	ba
च	ca	भ	bha
छ	cha	म	ma
ज	ja	य	ya
झ	jha	र	ra
ञ	ña	ल	la
ट	ṭa	व	va
ठ	ṭha	श	śa
ड	ḍa	ष	ṣa
ढ	ḍha	स	sa
ण	ṇa	ह	ha
त	ta	क्ष	kṣa
थ	tha	त्र	tra
द	da	ज्ञ	jña

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SIDDHI STHĀNA
(SECTION ON SUCCESSFUL ADMINISTRATION OF THERAPEUTIC MEASURES)

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CARAKA-SAṂHITĀ

KALPASTHĀNA

(SECTION ON PHARMACEUTICS)

Prologue

प्रथमोऽध्यायः

CHAPTER - I

(PHARMACEUTICS OF MADANA)

अथातो मदनकल्पं व्याख्यास्यामः।।१।।

इति ह स्माह भगवानात्रेयः।।२।।

Now we shall expound the chapter dealing with the "Pharmaceutics of *Madana* (*Randia dumetorum*)".

Thus, said Lord Ātreya. [1-2]

Purpose of Composing This Section

In the previous section on the "Treatment of Diseases", several recipes for emesis and purgation are prescribed in the context of the treatment of various diseases. In the present chapter on 'Pharmaceutics', these recipes will be described in detail along with their applicability in the treatment of various diseases. Thus, this is a section on recipes (*kalpa*).

Need for Describing This Section Before Siddhi-sthāna

Basti (medicated enema), etc., are also described for the treatment of diseases in the previous section. Therefore, the section dealing with various aspects of this *basti*-therapy (*Siddhi-sthāna*) is also required to be described as a part of the treatment of diseases. But while administering *Pañca-karma* (five specialised elimination therapies) in general, emetic (*vamana*) and purgation (*virecana*) therapies are to be administered before the administration of *basti* (medicated enema therapy). Therefore, *Kalpa-sthāna* dealing with these emetics and purgatives is placed before the description of *basti* therapy. *Basti* therapy will be described later in the *Siddhi* section.

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Purpose of Describing Emetics Before Purgatives

Generally, purgation therapy is administered only after the administration of emetic therapy. Therefore, the chapters describing emetic therapy are placed before the chapters dealing with purgative therapy in this section.

Purpose of Describing Madana-phala in the First Chapter

Among the emetic drugs, *madana-phala* is the best because it does not produce any adverse effect (-- vide para no. 13). Therefore, the chapter dealing with the recipes containing this drug is placed in the beginning of this section.

Objects of Kalpa-sthāna

अथ खलु वमनविरेचनार्थं वमनविरेचनद्रव्याणां सुखोपभोगतमैः सहान्यैर्द्रव्यैर्विधिवैः कल्पनार्थं-भेदार्थं विभागार्थं चेत्यर्थः, तद्योगानां च क्रियाविधेः सुखोपायस्य सम्यगुपकल्पनार्थं कल्पस्थानमुपदेक्ष्यामोऽग्निवेश !।। ३।।

O, Agniveśa ! hereafter, *Kalpa-sthāna* (section on Pharmaceutics) will be described by me (refers to Preceptor Ātreya) for the appropriate processing of the recipes with the following objectives :

(1) Preparation of recipes for emesis and purgation with main drugs added with the subsidiary ones like *surā* (alcohol), *sauvīra* (vinegar) and *kovidāra* having the most useful effects to facilitate emetic and purgative actions along with their *bheda* (varieties) and *vibhāga* (proportions); and

(2) Preparation of these recipes appropriately through different pharmaceutical processes (*kriyā-vidhi*) to facilitate easy action (*sukhopāya*). [3]

The term '*atha*' used in the above text implies a reference to the earlier statement. The term '*bheda*' implies varieties. For example, in *Sūtra* 4 : 4, *madana-phala* is described to be used in 133 different ways. The term '*vibhāga*' implies proportion. For example, in the para no. 16 of this chapter, it will be described that two out of the three parts of the seeds of *madana-phala* should be strained (*srāvayet*) by adding the decoction of *kovidāra*, etc.

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Definition of Vamana and Virecana

तत्र दोषहरणमूर्ध्वभागं वमनसंज्ञकम्, अधोभागं विरेचनसंज्ञकम्; उभयं वा शरीरमलविरेचनाद्विरेचनसंज्ञां लभते।। ४।।

The process of expelling morbid material through the upward tract (mouth) is called *vamana* (emesis). The process of expelling morbid material through the downward tract (anus) is called *virecana* (purgation). Since they expel (*virecanāt*) morbid material from the body, both these processes are also called [by the common term] *virecana* (purgation). [4]

Like emesis and purgation, *nirūha* type of medicated enema also helps in expelling morbid material from the body. By the definition given in the above text, the term *virecana* may also stand for this *nirūha* type of medicated enema. This presumption is, however, not correct. The term '*paṅkaja*' (one which grows in the mud) is applicable only to lotus, and not to others which also grow in the mud. On the same analogy, the term *virecana* is applicable only to emesis and purgation, and not to *nirūha* type of medicated enema.

Mode of Action of Emetics and Purgatives

तत्रोष्ण-तीक्ष्ण-सूक्ष्म-व्यवायि-विकाशीन्यौषधानि स्ववीर्येण हृदयमुपेत्य धमनीरनुसृत्य स्थूलाणुस्रोतोभ्यः केवलं शरीरगतं दोषसंघातमाग्नेयत्वाद् विष्यन्दयन्ति, तैक्ष्ण्याद् विच्छिन्दन्ति, स विच्छिन्नः परिप्लवन् स्नेहभाविते काये स्नेहाक्तभाजनस्थमिव क्षौद्रमसञ्जन्नणुप्रवणभावादामाशयमागम्योदानप्रणुन्नोऽग्निवाय्वात्मकत्वादूर्ध्वभागप्रभावादौषधस्योर्ध्वमुत्क्षिप्यते, सलिलपृथिव्यात्मकत्वादधोभागप्रभावाच्चौषधस्याधः प्रवर्तते, उभयतश्चोभयगुणत्वात्। इति लक्षणोद्देशः।। ५।।

Drugs [used for emesis and purgation] which are *uṣṇa* (hot), *tīkṣṇa* (sharp), *sūkṣma* (subtle), *vyavāyi* (those pervading the entire body before getting digested) and *vikāśī* (those causing looseness of joints), by virtue of their own potency, reach the heart, and circulate through the vessels. Because of their *āgneya* nature (predominance of *agni-mahābhūta*), they liquefy the compact (adhered) *doṣas* (morbid material), and because of their sharpness (*tīkṣṇa* attribute) they separate the

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adhered *doṣas* located in the gross and subtle channels of the entire body.

Like honey kept in a pot smeared with fat, the morbid material, after separation, moves floating without adhesion in the body which has been oleated [by the administration of oleation therapy]. Because of its nature to move through subtle channels and to flow (towards the gastro-intestinal tract), this morbid material reaches the stomach, and gets propelled by *udāna vāyu*.

Because of the predominance of *agni* and *vāyu-mahābhūtas* in these (emetic) drugs, and because of their specific action (*prabhāva*) to move upwards, the morbid material gets expelled through the upward tract (mouth).

[On the other hand, purgative] drugs, because of the predominance of *pṛthvī* and *jala-mahābhūtas*, and because of their specific actions (*prabhāva*) move downwards to expel the morbid material through the downward tract (anus).

Combination of both these attributes results in the expulsion of the morbid material through both the upward and downward tracts.

This is the brief description [of the mode of actions of emetics and purgatives]. [5]

Both the emetic and purgative drugs as stated above serve to liquefy the morbid material because of their *āgneyatva* (predominance of *agni-mahābhūta*). Emetic drugs are again described to be *agni-vāyu-ātmaka* (dominated by *agni* and *vāyu-mahābhūtas*). By implication, *agni-mahābhūta* is exceedingly predominant in emetic drugs. In purgative drugs, *agni-mahābhūta* is not dominant to that extent as in the case of emetics. The purgative drugs are mainly dominated by *pṛthvī* and *jala-mahābhūtas* with slight predominance of *agni-mahābhūta*. This is also the view of *Suśruta* (*Suśruta : Sūtra* 33:33).

Emetics and purgatives as stated in the text above serve as active purgatives because of the predominance of specific *mahābhūtas*, and also because of their *prabhāva* (specific action). *Prabhāva* is the specific action which cannot be rationally explained (*acintya śakti* --

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vide *Sūtra* 26 : 70). If the predominance of *mahābhūtas* is considered to be the causative factor, then the emetic and purgative actions cease to be the results of *prabhāva*. This presumption is, however, not correct. There are many drugs with pungent taste (which are dominated by *agni* and *vāyu-mahābhūtas*) but they are not emetics. So the emetic drugs, apart from the predominance of pungent taste in them, act as emetic because of *prabhāva* (specific action). Similarly, purgative drugs produce their effects not only because of the predominance of *pṛthvī* and *jala mahābhūtas,* but also because of their *prabhāva* or specific action.

Innumerability of Recipes

तत्र फल-जीमूतकेक्ष्वाकु-धामार्गव-कुटज-कृतवेधनानां, श्यामा-त्रिवृच्चतुरङ्गुल-तिल्वक-महावृक्ष-सप्तला-शङ्खिनी-दन्ती-द्रवन्तीनां च, नानाविधदेश-कालसंभवास्वाद-रस-वीर्य-विपाक-प्रभावग्रहणाद् देह-दोष-प्रकृति-वयो-बलाग्नि-भक्ति-सात्म्य-रोगावस्थादीनां नाना-प्रभाववत्त्वाच्च, विचित्रगन्ध-वर्ण-रस-स्पर्शानामुपयोगसुखार्थमसंख्येय-संयोगानामपि च सतां द्रव्याणां विकल्पमार्गोपदर्शनार्थं षड्विरेचनयोग-शतानि व्याख्यास्यामः।। ६।।

[Emetic drugs, viz.,] *phala, jīmūtaka, ikṣvāku, dhāmārgava, kuṭaja* and *kṛtavedhana,* and purgative drugs, viz., *śyāmā, trivṛt, caturaṅgula, tilvaka, mahāvṛkṣa, saptalā, śaṅkhinī, dantī* and *dravantī* are of different types depending upon the *deśa* (habitat), *kāla* (time of their availability), *sambhava* (origin), *āsvāda* (palatability), *rasa* (taste), *vīrya* (potency), *vipāka* (the taste that emerges after digestion) and *prabhāva* (specific action). Patients for whom these drugs are to be used are also of different types depending upon the nature of their *deha* (physique), condition of the *doṣas, prakṛti* (constitution), age, strength, *agni* (power of digestion and metabolism), *bhakti* (liking for a particular type of recipe), *sātmya* (wholesomeness), *rogāvasthā* (stage of the disease), etc. [To cater to the requirement of all these factors], the recipes of drugs become innumerable in types. Individual description of the recipes with permutation and combination is impossible. Therefore, by way of illustration, we shall confine our description only to six hundred recipes with

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multiple smell, colour, taste, and touch which are helpful (bestowers of happiness) with immediate and mediate effects. [6]

Six drugs are described above for emesis, and nine others are described for purgation. Use of these drugs individually is not enough to obtain the desired results. Effects of these drugs vary, depending upon their habitat, etc., and the nature of the physique, etc., of the patient. Therefore, the recipes based on their permutations and combinations are innumerable, and it is not possible to describe them all. Only six hundred of these recipes which are neither too brief nor too elaborate will be described in this section for the use of physicians of low calibre. On the basis of this description, the intelligent physician, well-versed in inference and propriety, can formulate many other recipes (which are not described here) to suit the exact requirement of his patient -- vide *Sūtra* 4 : 20.

Promoting Therapeutic Efficacy of Drugs

तानि तु द्रव्याणि देश-काल-गुण-भाजन-संपद्वीर्यबलाधानात् क्रियासमर्थतमानि भवन्ति।। ७।।

These drugs [for emesis and purgation] become capable of producing maximum therapeutic effects when their potency is augumented by *deśa-saṃpat* (collecting the plants from the appropriate habitat), *kāla-saṃpat* (collecting these plants in the appropriate season), *guṇa-saṃpat* (collecting plants when these are enriched with excellent attributes) and *bhājana-saṃpat* (storing these plants in appropriate containers). [7]

[Note : (1) The appropriate habitat from where these plants are to be collected will be described in para nos. 8-9.

(2) The appropriate season of collecting these plants, and their enriched conditions with excellent attributes are described in para no. 10.

(3) Appropriate methods of storage of these drugs in containers are described in para no. 11.]

Varieties of Habitat

त्रिविधः खलु देशः – जाङ्गलः, आनूपः, साधारणश्चेति। तत्र जाङ्गलः पर्याकाशभूयिष्ठः, तरुभिरपि च कदर-खदिरासनाश्वकर्ण-धव-तिनिश-

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शल्लकी-साल-सोमवल्क-बदरी-तिन्दुकाश्वत्थ-वटामलकीवनगहनः, अनेकशमी-ककुभ-शिंशपाप्रायः, स्थिरशुष्कपवनबलविधूयमानप्रनृत्यत्तं-रुणविटपः, प्रततमृगतृष्णिकोपगूढतनुखरपरुषसिकताशर्कराबहुलः, लाव-तित्तिरिचकोरानुचरितभूमिभागः, वातपित्तबहुलः, स्थिरकठिनमनुष्यप्रायो ज्ञेयः; अथानूपो हिन्तालतमालनारिकेलकदलीवनगहनः, सरित्समुद्रपर्यन्त-प्रायः, शिशिरपवनबहुलः, वञ्जुलवानीरोपशोभिततीराभिः सरिद्भिरुप-गतभूमिभागः, क्षितिधरनिकुञ्जोपशोभितः, मन्दपवनानुवीजितक्षितिरुह-गहनः, अनेकवनराजीपुष्पितवनगहनभूमिभागः, स्निग्धतरुप्रतानोपगूढः, हंस-चक्रवाक-बलाका-नन्दीमुख-पुण्डरीक-कादम्ब-मद्गु-भृङ्गराज-शतपत्र-मत्तकोकिलानुनादिततरुविटपः, सुकुमारपुरुषः, पवनकफप्रायो ज्ञेयः; अनयोरेव द्वयोर्देशयोर्वीरुद्वनस्पतिवानस्पत्यशकुनिमृगगणयुतः स्थिरसुकु-मारबलवर्णसंहननोपपन्नसाधारणगुणयुक्तपुरुषः साधारणो ज्ञेयः।। ८।।

Habitats (*deśa*) are of three types, viz., *jāṅgala* (dry forest land), *ānūpa* (marshy land) and *sādhāraṇa* (normal land).

The *jāṅgala-deśa* (dry forest land) is characterized as follows :

(1) It abounds in open sky;

(2) It has deep forests of trees like *kadara, khadira, asana, aśva-karṇa, dhava, tiniśa, śallakī, sāla, soma-valka, badarī, tinduka, aśvattha, vaṭa* and *āmalakī*;

(3) It is mostly surrounded by trees of *śamī, kakubha* and *śiṃśapā* in large number;

(4) The tender branches of these trees dance, being swayed by the force of continuous dry wind;

(5) It abounds in thin, dry and rough sands as well as gravels which give rise to mirages;

(6) This area is inhabited by *lāva, tittiri* and *cakora;* and

(7) The people inhabiting this type of land are dominated by *vāyu* and *pitta,* and most of them are sturdy and hardy.

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The *ānūpa-deśa* (marshy land) is characterized as follows :

(1) It contains deep forests of trees like *hintāla, tamāla, nārikela* and *kadalī*;

(2) It is located generally at the banks of rivers and sea;

(3) Mostly cold wind blows here;

(4) This type of land is located in the neighbourhood of rivers whose banks are beautified by plants like *vañjula* and *vānīra*;

(5) It has mountains covered with beautiful creepers;

(6) The trees in this thick forest wave with the gentle breeze;

(7) The area is surrounded by thick forests with beautiful and blossoming trees;

(8) It is covered with tender branches of trees;

(9) The branches of trees located here are echoed with the sound produced by birds like *haṃsa, cakravāka, balākā, nandī-mukha, puṇḍarīka, kādamba, madgu, bhṛṅgarāja, śatapatra* and inebriated *kokila;* and

(10) People inhabiting this type of land are of tender body, and generally they are dominated by *vāyu* and *kapha.*

The *sādhāraṇa-deśa* (normal land) is characterized as follows :

(1) It has creepers, *vanaspati* (trees having fruits without apparent flowers), *vānaspatya* (trees having both fruits and flowers), birds and beasts described above in respect of *jāṅgala-deśa* (dry forest land) and *ānūpa-deśa* (marshy land); and

(2) Persons inhabiting this land are sturdy, tender, endowed with strength, complexion and compactness, as well as other attributes of people inhabiting in the land of general nature. [8]

[Note : ***Cakrapāṇi*** refers to some recensions of ***Caraka-saṃhitā***

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where the characteristic features of different types of land (*deśa*) are described in the third chapter of *Vimāna*-section. Scholars having that recension of *Caraka-saṃhitā* consider the present description of different types of land as unauthentic.

In the present edition of this text, only the morbid conditions of land are described in *Vimāna* 3 : 7, and the description of three different types of land with their natural characteristics is not available. Therefore, the text above is considered to be appropriate and authentic according to him.]

Appropriate Habitat for Drug Collection

तत्र देशे साधारणे जाङ्गले वा यथाकालं शिशिरातपपवनसलिलसेविते समे शुचौ प्रदक्षिणोदके श्मशान-चैत्य-देवयजनागार-सभा-श्वभ्राराम-वल्मीकोषरविरहिते कुशरोहिषास्तीर्णे स्निग्धकृष्णमधुरमृत्तिके सुवर्णवर्ण-मधुरमृत्तिके वा मृदावफालकृष्टेऽनुपहतेऽन्यैर्बलवत्तरैर्द्रुमैरौषधानि जातानि प्रशस्यन्ते।। ९।।

Medicinal plants, for producing excellent therapeutic effects, should be collected from places having the following characteristic features :

(1) These are to be collected from *sādhāraṇa-deśa* (forests of normal land) or *jāṅgala-deśa* (dry land forests);

(2) Plants should have been exposed to seasonal cold, sun, wind and rain appropriately;

(3) Plants should have grown over plains and clean land surrounded by water reservoirs;

(4) Plants should not have been grown in a crematorium, *caitya* (sacred tomb), prayer ground, assembly ground, pits, parks, ant-hills and saline soil;

(5) The land should have enormous growth of *kuśa* and *rohiṣa*;

(6) The soil should be unctuous, black in colour and sweet in taste or golden in colour and sweet in taste; and

(7) The land should not have been ploughed, and there should not be other big trees in the vicinity over-shadowing the medicinal plants. [9]

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Appropriate Time and Method of Drug Collection

तत्र यानि कालजातान्युपागतसंपूर्णप्रमाण-रसवीर्य-गन्धानि कालात-पाग्निसलिलपवनजन्तुभिरनुपहतगन्धवर्णरसस्पर्शप्रभावाणि प्रत्यग्राण्युदीच्यां दिशि स्थितानि; तेषां शाखापलाशमचिरप्ररूढं वर्षावसन्तयोर्ग्राह्यं, ग्रीष्मे मूलानि शिशिरे वा शीर्णप्ररूढपर्णानां, शरदि त्वक्कन्दक्षीराणि, हेमन्ते साराणि, यथर्तु पुष्पफलमिति; मङ्गलाचारः कल्याणवृत्तः शुचिः शुक्लवासाः संपूज्य देवता अश्विनौ गोब्राह्मणांश्च कृतोपवासः प्राङ्मुख उदङ्मुखो वा गृह्णीयात्।। १०।।

Drugs should be collected in the appropriate season when they have attained maturity in respect of their size, taste, potency and smell. Their smell, colour, taste, touch and *prabhāva* (specific action) should have remained unaffected by *kāla* (time, viz., over-maturity), excessive exposure to sun-rays, fire, water and wind, and by parasites. They should be endowed with all attributes. They should be collected from the northern side.

Fresh branches and tender leaves should be culled in the rainy season and spring. Their roots should be collected in summer or late winter (*śiśira*) when the leaves of the trees have ripened and withered out. Their barks, rhizomes and latex should be collected in the autumn. Their *sāra* (heart-wood including exudates) should be collected in *hemanta* (early winter). Flowers and fruits should be collected during appropriate seasons [when flowers and fruits appear in the plant].

One should collect the various parts of these plants while facing towards the east or north after performing auspicious rites in a spirit of compassion, while living a pure life, while wearing white dress, after offering prayers to the gods, Aśvins, cows and brahmins, and while observing fast. [10]

According to the paragraph no. 7, drugs are required to be collected keeping in view the appropriate habitat (*deśa-saṃpat*), appropriate season (*kāla-saṃpat*) and their effective attributes (*guṇa-saṃpat*). In the above text the last two items are explained.

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The flowers and fruits which appear in their natural and appropriate seasons should be used in medicine.

Stems as well as tender leaves are required to be collected in the rainy season and spring. The bark, etc., of these stems may also be collected during this period.

Roots of plants are required to be collected either in summer or in *śiśira* (late winter). By implication, roots having heating effects are to be collected in summer, and those having cooling effects are to be collected in the late winter (Vide *Suśruta* : *Sūtra* 36 : 5).

Proper Storage

गृहीत्वा चानुरूपगुणवद्भाजनस्थान्यागारेषु प्रागुदग्द्वारेषु निवात-प्रवातैकदेशेषु नित्यपुष्पोपहारबलिकर्मवत्सु, अग्निसलिलोपस्वेदधूमरजो-मूषकचतुष्पदामनभिगमनीयानि स्ववच्छन्नानि शिक्येष्वासज्य स्थापयेत्।। ११।।

The collected plant products should be kept in appropriate containers well covered with a lid, and hung on a swing. The store-room should have doors facing towards the east or the north. The room should be immune to the wind or storm and there should be only one window for ventilation. Flower-offerings and sacrificial rituals should be performed in the store-room every day. It should be free from the hazards of fire, water, moisture, smoke, dust, mice and quadrupeds.

[11]

The container to be used for storing drugs should have attributes similar to those of the drugs.

Adjuvants According to Doṣas

तानि च यथादोषं प्रयुञ्जीत सुरा-सौवीरक-तुषोदक-मैरेय-मेदक-धान्याम्ल-फलाम्ल-दध्यम्लादिभिर्वाते, मृद्वीकामलक-मधु-मधुक-परूषक-फाणित-क्षीरादिभिः पित्ते, श्लेष्मणि तु मधु-मूत्र-कषायादिभिर्भावितान्यालोडितानि च; इत्युद्देशः। तं विस्तरेण द्रव्य-देह-दोष-सात्म्यादीनि प्रविभज्य व्याख्यास्यामः।। १२।।

Different adjuvants are required to be used along with these drugs in accordance with the *doṣas* involved in the causation of the disease. These drugs should be impregnated

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and mixed with *surā, sauvīraka, tuṣodaka, maireyaka, medaka, dhānyāmla, phalāmla* (juice of sour fruits like pomegranate), *dadhyamla* (sour yoghurt), etc., for the treatment of diseases caused by *vāyu*. For the treatment of diseases caused by *pitta*, these drugs are to be used by adding *mṛdvīkā, āmalaka, madhu* (honey), *madhuka, parūṣaka, phāṇita*, milk, etc. For the treatment of diseases caused by *kapha*, these recipes are to be added with *madhu* (honey), *mūtra* (urine), *kaṣāya* (decoctions of *kapha*-alleviating drugs), etc. Thus, the adjuvants are described in brief.

We shall hereafter, describe them in detail in relation to different categories of *dravya* (nature of the drug), *deha* (requirements of various types of physique), *doṣas* (aggravated to cause the disease) and *sātmya* (homologation). [12]

Apart from *dravya, deha, doṣa* and *sātmya* as mentioned in the above text, different types of *prakṛti* (constitution), *bala* (strength), etc., are also to be taken into consideration while describing the recipes to be prepared of these drugs.

Collection, Storage and Recipes of Madana-phala

वमनद्रव्याणां मदनफलानि श्रेष्ठतमान्याचक्षते, अनपायित्वात्। तानि वसन्तग्रीष्मयोरन्तरे पुष्याश्वयुग्भ्यां मृगशिरसा वा गृह्णीयान्मैत्रे मुहूर्ते। यानि पक्वान्यकोणान्यहरितानि पाण्डून्यक्रिमीण्यपूतीन्यजन्तुजग्धान्यह्रस्वानि; तानि प्रमृज्य, कुशपुटे बद्ध्वा, गोमयेनालिप्य, यवतु(बु)षमाषशालिकुलत्थ-मुद्गपलानामन्यतमे निदध्यादष्टरात्रम्। अत ऊर्ध्वं मृदूभूतानि मध्विष्टगन्धा-न्युद्धृत्य शोषयेत्। सुशुष्काणां फलपिप्पलीरुद्धरेत्। तासां घृतदधिमधुपल-लविमृदितानां पुनः शुष्काणां नवं कलशं सुप्रमृष्टवालुकमरजस्कमाकण्ठं पूरयित्वा स्ववच्छन्नं स्वनुगुप्तं शिक्येष्वासज्य सम्यक् स्थापयेत्।। १३।।

Fruits of *madana* are considered to be the best among the emetics because they are free from any adverse side effects. These fruits are to be collected during the middle of the spring and summer in a *maitra-muhūrta* (auspicious period of the day) when the moon is in the constellation of *Puṣya, Aśvinī* or *Mṛgaśiras*. These fruits should be fully matured, not perforated,

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not green but yellowish white in colour, not rotten, not infested with parasites and not small in size. These fruits should be cleaned and tied up inside a bundle of *kuśa* grass. These bundles should be kept inside a heap either of barley husk, *māṣa, śāli* type of paddy, *kulattha* or *mudga* for eight nights.

Afterwards, when they have become soft and are endowed with desirable smell like that of honey, these fruits should be taken out of the bundle and dried up. When these are well dried up., their seeds should be taken out. These seeds should be rubbed with ghee, curd, honey and oil-cake, and dried again. These seeds should then be kept in a new jar cleaned of sand and dust particles and filled up to its brim. This jar should be properly covered with a lid, and after the performance of protective rituals, should be placed in a swing. [13]

In contrast to other emetic drugs, *madana-phala* has much less of complications when administered for emesis.

Procedure of Administering Emetic Therapy

अथ च्छर्दनीयमातुरं द्व्यहं त्र्यहं वा स्नेहस्वेदोपपन्नं श्वश्छर्दयितव्यमिति ग्राम्यानूपौदकमांसरस-क्षीर-दधि-माष-तिल-शाकादिभिः समुत्क्लेशित-श्लेष्माणं व्युषितं जीर्णाहारं पूर्वाह्णे कृतबलिहोममङ्गलप्रायश्चित्तं निरन्नमन-तिस्निग्धं यवाग्वा घृतमात्रां पीतवन्तं, तासां फलपिप्पलीनामन्तर्नखमुष्टि यावद्वा साधु मन्येत जर्जरीकृत्य यष्टिमधुकषायेण कोविदार-कर्बुदार-नीप-विदुल-बिम्बी-शणपुष्पी-सदापुष्पी-प्रत्यक्पुष्पी-कषायाणामन्यतमेन वा रात्रि-मुषितं विमृद्य पूतं मधुसैन्धववयुक्तं सुखोष्णं कृत्वा पूर्णं शरावं मन्त्रेणा-नेनाभिमन्त्रयेत्—

'ॐब्रह्मदक्षाश्विरुद्रेन्द्रभूचन्द्रार्कानिलानलाः।
ऋषयः सौषधिग्रामा भूतसङ्घाश्च पान्तु ते।।
रसायनमिवर्षीणां देवानाममृतं यथा।
सुधेवोत्तमनागानां भैषज्यमिदमस्तु ते।।'

इत्येवमभिमन्त्र्योदङ्मुखं प्राङ्मुखं वाऽऽतुरं पाययेच्छ्लेष्मज्वरगुल्मप्रति-श्यायार्तं विशेषेण पुनः पुनरापित्तागमनात्, तेन साधु वमति; हीनवेगं तु

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पिप्पल्यामलक-सर्षप-वचाकल्कलवणोष्णोदकैः पुनः पुनः प्रवर्तयेदापित्त-दर्शनात्। इत्येष सर्वश्छर्दनयोगविधिः।। १४।।

The person should be subjected to oleation-cum-fomentation therapies for two or three days prior to the administration of emetic therapy.

During the night before the day of administration of the emetic therapy, he should be given the diet consisting of the soup of the meat of *grāmya* (domesticated), *ānūpa* (marshy land-inhabiting) and *audaka* (aquatic) animals, milk, curd, *māṣa,* sesamum seeds, vegetables, etc., for the excitation of *kapha*.

In the next morning when the food taken in the previous night is digested, after performing *bali* (religious sacrifices), *homa* (sacred ritual of offering oblations of ghee to fire), *maṅgala* (auspicious rituals) and *prāyaścitta* (rituals for neutralizing effects of possible sinful acts), and when the stomach is empty, the patient who is *anati-snigdha* (has not been excessivly oleated), should be given gruel added with some ghee to take.

Seeds of *madana-phala*, a fistful in quantity or in a quantity as may be found appropriate, may be crushed, added with the decoction of either *yaṣṭi-madhu, kovidāra* (which flowers in the autumn), *karbudāra* (*kāñcanāra* which flowers in the spring), *nīpa (kadamba), vidula (vetasa), bimbī, śaṇa-puṣpī (ghaṇṭāravā), sadā-puṣpī (arka-puṣpikā)* or *pratyak-puṣpī (apāmārga)*, and kept overnight. In the morning, this should be stirred with hand and filtered. The liquid, thus obtained, should be added with honey and rock-salt, made slightly warm, filled upto the brim in a drinking pot, and impregnated with the following *mantra*. [The *mantra* has to be recited in its original language for which the script is Romanized below. The translation is furnished thereafter only for the comprehension of its connotations.]

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Original *Mantra* :

'Om brahma-dakṣāśvirudrendra-
bhū-candrārkānilānalāḥ /
ṛṣayaḥ sauṣadhigrāmā
bhūtasaṅghāśca pāntu te //
rasāyanamivarṣīṇāṃ
devānām amṛtaṃ yathā /
sudhevottamanāgānāṃ
bhaiṣajyam idam astu te //'

Translation of the *Mantra* :

May Brahmā, Dakṣa, the Aśvins, Rudra, Indra, the Earth, the Moon, the Sun, the Wind, the Fire, the Sages, all the Drugs and all the living beings protect you.

Let the recipe produce effects on you as the rejuvenating recipes have done to the sages, as the ambrosia has done to the gods, and as *sudhā* (a type of ambrosia) has done to the chief of the *Nāgas*.

After the recipe has been impregnated with the *mantra* described above, it should be administered to the patient while he is facing towards the east or the north repeatedly till the bile comes out along with the vomited material. This is essential, specially for the patients suffering from *kaphaja* type of fever, *gulma* (phantom tumour) and *pratiśyāya* (chronic cold). By this method, emesis takes place properly.

If the urge for vomiting is weak, then this should be augmented by the repeated administration of the paste of *pippalī, āmalaka, sarṣapa* and *vacā* added with salt and warm water till the bile appears in the vomited material.

This is the method of administering all types of emetic recipes.

[14]

The term '*sneha-sveda*' mentioned in the above text refers to

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fomentation (*sveda*) after massage with oil, etc., (*sneha*). In *Siddhi* 1 : 6, a physician is advised to give fomentation therapy after oleation for three days minimum and seven days maximum. That statement refers to the oleation therapy administered through mouth. Thus, there is no contradiction between these two statements.

Before the administration of emetic therapy, *sneha-sveda* (massage with oil accompanied with fomentation) is stated to be given for two or three days. This oil massage cum fomentation therapy should be given only after the administration of oral oleation therapy. In fact, it should start from the last day of the oral oleation therapy. After oral oleation therapy (as stated in *Sūtra* 13 : 81), a gap of one day should be given before giving food. Thereafter, emetic therapy should be given. So oil massage cum fomentation therapy can be given for three days before the administration of emetic therapy, i.e. on the last day of the oral oleation therapy, on the intervening day and on the day when *kapha*-exciting food is to be given at night. The duration of three days can be reduced to only two days by omitting this massage cum fomentation therapy either on the first day or on the last day as per the requirement of the patient.

The term '*anati-snigdha*' meaning 'not very unctuous' mentioned in the above text can be interpreted in two different ways, viz., (1) the patient, only when he is not very unctuous, should be given emetic therapy, and (2) the patient, if he is not very unctuous, can be given emetic therapy after he has taken gruel added with ghee which causes unctuousness.

Emetic therapy should be administered in the morning when there is *sādhāraṇa-kāla* (neither too hot, nor too cold, nor too humid)--vide *Suśruta* : *Cikitsā* 33 : 7.

Seeds of *madana-phala* are stated to be taken in *antar-nakha-muṣṭi* or fistful quantity or in any other appropriate quantity. By implication, there is no fixed dose of this recipe. The dose may vary, depending upon the strength of the patient, nature of the aggravated *doṣas* and such other factors.

While enumerating the drugs for decoction, *yaṣṭi-madhu* is separated from the remaining eight drugs like *kovidāra* because these (group of) eight drugs will be frequently used in the preparation of recipes to be described later.

Powder of the seeds of *madana-phala* is stated to be mixed with the decoction of drugs, kept over-night, strained and then administered. By

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implication, the recipe has to undergo a second process of decoction. Alternatively, this recipe is to be used in the form of *śīta-kaṣāya* (cold infusion).

The cup to be used for taking the recipe is stated to be filled upto the brim with the liquid recipe because of its auspiciousness like *pūrṇa-kumbha* (jar filled upto the brim with water and covered with leaves, flowers and coconut which is during sacred rituals, kept near the main entrance or in the sacred pendal for bestowing auspiciousness).

The patient should take the recipe repeatedly till the bile appears in the vomited material. This point will also be emphasised in *Siddhi* 1:14.

Use of Honey and Rock-salt

सर्वेषु तु मधुसैन्धवं कफविलयनच्छेदार्थं वमनेषु विदध्यात्। न चोष्णविरोधो मधुनश्छर्दनयोगयुक्तस्य, अविपक्वप्रत्यागमनाद्दोषनिर्हरणाच्च।। १५।।

In all the emetic recipes, honey and rock-salt should be added in order to facilitate the liquefaction and *chedana* (separation of adhesion) of *kapha*. This honey added to emetic recipes is not incompatible with heat (i.e. taken after it is added to hot water which generally produces toxic reactions) because this honey is thrown out undigested along with vomited material, and helps in the elimination of morbid *doṣas*. [15]

There are emetic recipes which are taken by inhalation. In such recipes honey and rock-salt are not added. Since in many recipes for emesis, these two drugs are used, the term '*sarveṣu*' generally meaning 'in all' is used only to emphasise their more frequent use (*bāhulyāt*).

It is stated in *Sūtra* 27 : 246 that honey heated or given to a patient suffering from hot ailments is harmful. In the emetic recipes, however, honey taken along with hot water is thrown out before digestion along with vomited material. In addition, honey helps in the elimination of morbid material. So it is usefully added to the emetic recipes.

Similarly, in the recipes for *basti* (medicated enema), use of honey along with warm liquids is considered to be non-contradictory.

Along with nine drugs like *yaṣṭi-madhu*, etc., nine recipes of *madana-phala* are described in the above text.

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Eight Recipes of Madana-phala in Pill Form

फलपिप्पलीनां द्वौ द्वौ भागौ कोविदारादिकषायेण त्रिःसप्तकृत्वः स्रावयेत्, तेन रसेन तृतीयं भागं पिष्ट्वा मात्रां हरीतकीभिर्बिभीतकैरामलैर्वा तुल्यां वर्तयेत्, तासामेकां द्वे वा पूर्वोक्तानां कषायाणामन्यतमस्याञ्जलि-मात्रेण विमृद्य बलवच्छ्लेष्मप्रसेकग्रन्थिज्वरोदरारुचिषु पाययेदिति समानं पूर्वेण।। १६।।

Two (out of three) parts of the seeds of *madana-phala* should be added with (six times of) the decoctions of *kovidāra*, etc., (including *karbudāra, ṇīpa, vidula, bimbī, śaṇa-puṣpī, sadā-puṣpī* and *pratyak-puṣpī*--these eight drugs are described in para no. 14), and strained (*srāvayet*) for twenty one times. With this liquid, the (remaining) third part of the seeds should be triturated and made to a paste. From out of this paste, pills of the size of *harītakī, bibhītaka* or *āmalakī* should be prepared. One or two of these pills should be given by rubbing with one *añjali* (approximately 192 ml.) of the decoction either of the eight drugs (described above) to a patient suffering from *praseka* (salivation), *granthi* (tumour or nodules), *jvara* (fever), *udara* (obstinate abdominal diseases including ascites) and *aruci* (anorexia).

The remaining procedure as described above (in para no. 14) should be adopted for these recipes also. [16]

Seeds (powder) of *madana-phala* should be divided into three parts. Two parts of it should be added with six times of the decoctions of *kovidāra,* etc. On the line suggested for alkali preparations (*kṣāra-nirmāṇa-vidhi*), this mixture of powder and decoction should be strained (through a cloth) for twenty one times. This process should be done separately by adding each of the eight decoctions. To the liquid that comes out after adding decoction and straining for twenty one times each of these eight decoctions, the third part of the (powder of) *madana-phala* should be triturated and made to a paste. From out of this paste, pills of different sizes are to be prepared. One or two of these pills are to be given to the patient for emesis. These are called *mātrā-yoga* (recipe of pills).

These pills are to be administered with the decoction of any one of

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the eight drugs described above. Thus, they constitute eight recipes of *madana-phala.*

The procedure prescribed for recipes in para no. 14 like recitation of *mantra* is to be followed for the recipes described here and others to be described later in this chapter.

Recipes of Madana-phala Prepared with Milk

फलपिप्पलीक्षीरं, तेन वा क्षीरयवागूमधोभागे रक्तपित्ते हृद्दाहे च; तज्जस्य वा दध्न उत्तरकं कफच्छर्दितमकप्रसेकेषु; तस्य वा पयसः शीतस्य सन्तानिकाञ्जलिं पित्ते प्रकुपिते उरःकण्ठहृदये च तनुकफोपदिग्धे; इति समानं पूर्वेण।। १७।।

The four recipes of *madana-phala* prepared by boiling with milk are as follows :

(1) According to the procedure prescribed for *kṣīra-pāka,* seeds of *madana-phala* should be cooked by adding milk.

(2) Gruel should be prepared by adding this milk. Both the above mentioned recipes are useful as emetics for patients suffering from downward (*adhoga*) type of *rakta-pitta* (a disease characterized by bleeding through the downward tracts) and *hṛd-dāha* (burning sensation in the cardiac region.

(3) Cream should be taken out of the yoghurt prepared of the above mentioned medicated milk. This is useful in *kaphaja* type of *chardi* (vomiting), *tamaka* (asthma) and *praseka* (ptyalism).

(4) The milk described in item no. 1 above should be cooled, and the cream from this milk should be taken out. This cream should be administered in the dose of one *añjali* (192 ml). This is useful when *pitta* is aggravated, and the chest, throat as well as heart are adhered with thin layer of *kapha.*

The rest of the procedure, to be followed in this connection, should be as described before (in the paragraph no. 14).

[17]

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Recipe of Madana-phala Prepared with Butter

फलपिप्पलीभृतक्षीरान्नवनीतमुत्पन्नं फलादिकल्ककषायसिद्धं कफाभिभूताग्निं विशुष्यद्देहं च मात्रया पाययेदिति समानं पूर्वेण ।।१८।।

The butter collected from the milk boiled with the seeds of *madana-phala* should be cooked by adding the paste and decoction of *madana-phala*, (*jīmūtaka, ikṣvāku, dhāmārgava, kuṭaja* and *kṛta-vedhana*). This medicated ghee should be administered in appropriate dose to a patient suffering from the suppression of *agni* (enzymes responsible for digestion) by *kapha*, and dehydration of the body.

The rest of the procedure to be followed in this connection should be as described earlier (in para no. 14). [18]

Four recipes prepared by boiling *madana-phala* with milk are described in para no. 17. In the above text one recipe prepared by boiling *madana-phala* in butter is described. These are the five recipes of milk and ghee which are referred to in the verse no. 28 while summarising the contents of this chapter.

Recipe of Madana-phala for Inhalation

फलपिप्पलीनां फलादिकषायेण त्रिःसप्तकृत्वः सुपरिभावितेन पुष्परजःप्रकाशेन चूर्णेन सरसि संजातं बृहत्सरोरुहं सायाह्नेऽवचूर्णयेत्, तद्रात्रिव्युषितं प्रभाते पुनरवचूर्णितमुद्धृत्य हरिद्राकृसरक्षीरयवागूनामन्यतमं सैन्धवगुडफाणितयुक्तमाकण्ठं पीतवन्तमाघ्रापयेत् सुकुमारमुत्क्लिष्टपित्तकफमौषधद्वेषिणमिति समानं पूर्वेण।। १९।।

Seeds of *madana-phala* should be well impregnated with the decoction of *phala*, (*jīmūtaka, ikṣvāku, dhāmārgava, kuṭaja* and *kṛta-vedhana*) for twenty one times, and made to fine powder resembling the pollens of flowers. In the evening, a big lotus flower growing in a pond should be sprinkled with this powder, and kept there overnight. In the next morning, the powder should be collected from over the petals of the flower. This powder should be given for inhalation to a patient who is of tender nature, in whom *pitta* and *kapha* are excited and who has aversion to taking medicine orally. This inhalation

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therapy should be administered after the patient is fully fed (upto the throat) with *Haridrā-kṛsara* (a type of gruel preparation containing rice and lentils), milk or gruel after adding rock-salt, jaggery and *phāṇita* (treacle).

The rest of the process to be followed in this connection should be the same as described before (in para no. 14).

135498 [19]

This is the recipe of *madana-phala* to be used for emesis by inhalation.

Recipes of Madana-phala in the form of Treacle and Powder

फलपिप्पलीनां भल्लातकविधिपरिस्रुतं स्वरसं पक्त्वा फाणितीभूतमातन्तुलीभावाल्लेहयेत् ; आतपशुष्कं वा चूर्णीकृतं जीमूतकादिकषायेण पित्ते कफस्थानगते पाययेदिति समानं पूर्वेण।। २०।।

The juice of *madana-phala* should be extracted according to the procedure already described for extracting the essence of *bhallātaka* (vide *Cikitsā* 1: 3:14). It should then be cooked till it is reduced to the consistency of treacle, and till threads appear when a portion of the paste is pulled out. This linctus should be taken by the patient.

The seeds of *madana-phala* should be dried in the sun, added with the decoction of *jīmūtaka*, etc. made to a powder, and administered to the patient who is suffering from ailments caused by the migration of the morbid *pitta* to the habitat of *kapha.*

The rest of the procedure to be followed in this connection should be as described before (in para no. 14). [20]

Two different recipes of *madana-phala* are described above -- one in the form of treacle and the other in the form of powder.

Recipes of Madana-phala in the form of Varti

फलपिप्पलीचूर्णानि पूर्ववत् फलादीनां षण्णामन्यतमकषायस्रुतानि वर्तिक्रियाः फलादिकषायोपसर्जनाः पेया इति समानं पूर्वेण।। २१।।

Powder of the seeds of *madana-phala* should be boiled in

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the decoction of either of the six drugs, viz., *madana-phala, jīmūtaka, ikṣvāku, dhāmārgava, kuṭaja* and *kṛtavedhana*, and made to *vartis* (elongated pills). These are to be taken mixed with the decoction of *madana-phala*, etc.

The rest of the procedure to be followed in this connection should be as described before (in para no. 14). [21]

The *varti* (elongated pill) of *madana-phala* is to be prepared by boiling with the decoction of each of the six drugs, viz., *madana-phala, jīmūtaka, ikṣvāku, dhāmārgava, kuṭaja* and *kṛta-vedhana* individually. Thus, these constitute the six different recipes of *madana-phala* in the form of *varti*.

For the preparation of *varti*, the powder has to be added with four times of the decoction and boiled. Like any other linctus preparation, honey should be added to this recipe also. Some physicians, however, do not like honey to be added to this preparation because cooking a substance with honey as an ingredient is incompatible.

Recipes of Madana-phala in the form of Linctus

फलपिप्पलीनामारग्वध-वृक्षक-स्वादुकण्टक-पाठा-पाटला-शार्ङ्गेष्टा-मूर्वा-सप्तपर्ण-नक्तमाल-पिचुमर्द-पटोल-सुषवी-गुडूची-सोमवल्क-द्वीपिकानां पिप्पली-पिप्पलीमूल-हस्तिपिप्पली-चित्रक-शृङ्गवेराणां चान्यतमकषायेण सिद्धो लेह इति समानं पूर्वेण।। २२।।

Seeds of *madana-phala* should be made to linctus by boiling with the decoction of one of (1) *āragvadha*, (2) *vṛkṣaka* (*kuṭaja*), (3) *svādu-kaṇṭaka* (*vikaṅkata*), (4) *pāṭhā*, (5) *pāṭalā*, (6) *śārṅgeṣṭā* (*guñjā*), (7) *mūrvā*, (8) *sapta-parṇa*, (9) *nakta-māla*, (10) *picu-marda*, (11) *paṭola*, (12) *suṣavī* (*kāravellaka*), (13) *guḍūcī*, (14) *somavalka*, (15) *dvīpikā*, (16) *pippalī*, (17) *pippalī-mūla*, (18) *hasti-pippalī*, (19) *citraka*, or (20) *śṛṅgavera* [and given to the patient for emesis].

The rest of the procedure to be followed in this connection should be as described before (in para no. 14). [22]

Since the seeds of *madana-phala* are to be boiled by adding twenty different drugs separately, these are twenty recipes in the form of linctus (*leha*).

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Preparation of Madana-phala in the form of Utkārikā and Modaka

फलपिप्पलीष्वेला-हरेणुका-शतपुष्पा-कुस्तुम्बुरु-तगर-कुष्ठ-त्वक्-चोरक-मरुबकागुरु-गुग्गुल्वेलवालुक-श्रीवेष्टक-परिपेलव-मांसी-शैलेयक-स्थौणेयक-सरल-पारावतपद्मशोकरोहिणीनां विंशतेरन्यतमस्य कषायेण साधितोत्कारिका उत्कारिकाकल्पेन, मोदका वा मोदककल्पेन, यथादोष-रोगभक्ति प्रयोज्या इति समानं पूर्वेण।। २३।।

Seeds of *madana-phala* should be cooked with the decoctions of one of the twenty drugs, viz., (1) *elā,* (2) *hareṇukā,* (3) *śata-puṣpā,* (4) *kustumburu,* (5) *tagara,* (6) *kuṣṭha,* (7) *tvak,* (8) *coraka,* (9) *marubaka,* (10) *aguru,* (11) *guggulu,* (12) *ela-vāluka,* (13) *śrīveṣṭaka,* (14) *paripelava* (*kaivarta-mustaka*), (15) *māṃsī,* (16) *śaileyaka,* (17) *sthauṇeyaka* (*granthiparṇaka*), (18) *sarala,* (19) *pārāvata-padī,* and (20) *aśoka-rohiṇī* (*kaṭu-rohiṇī*).

With the pastes, thus obtained (twenty types each of), *utkārikā* (pan-cake) and *modaka* (sweetmeat) should be prepared, following the procedure prescribed for *utkārikā* and *modaka* respectively. These are to be administered in accordance with the aggravated *doṣas,* the nature of the disease, and likings (proclivities) of the patient.

The rest of the procedure to be followed in this connection should be as described in para no. 14. [23]

Twenty types each of *utkārikā* and *modaka* are described in the above text.

The plant *aśoka-rohiṇī* has leaves like *aśoka.* Some physicians interpret it to mean '*kaṭu-rohiṇī*'.

Some physicians use '*apākī-pādī*' in the place of '*sthauṇeyaka*'.

The methods of preparing *utkārikā* [and *modaka*] are described in the works on "the Science of Culinary" (*Sūda-śāstra*).

Preparations of Madana-phala in the form of Śaṣkulī and Pūpa

फलपिप्पलीस्वरसकषायपरिभावितानि तिलशालितण्डुलपिष्टानि

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तत्कषायोपसर्जनानि शष्कुलीकल्पेन वा शष्कुल्यः, पूपकल्पेन वा पूपाः, इति समानं पूर्वेण।। २४।।

एतेनैव च कल्पेन सुमुख-सुरस-कुठेरक-काण्डीर-कालमालक-पर्णासक-क्षवक-फणिञ्झक-गृञ्जन-कासमर्द-भृङ्गराजानां पोटेक्षुवालिका-कालङ्कतक-दण्डैरकाणां चान्यतमस्य कषायेण कारयेत्।। २५।।

The paste of *tila* and *śāli*-rice should be prepared by adding the juice or decoction of the seeds of *madana-phala*. This paste should be further processed by adding the decoction of the seeds of *madana-phala*. Out of this paste, *śaṣkulī* (a type of pan-cake) and *pūpa* (a preparation of sweetmeat) should be prepared, and administered to the patient.

The rest of the procedure to be followed in this connection should be as described earlier (in para no. 14).

[The paste of *tila* and *śāli*-rice prepared with the juice or decoction of the seeds of *madana-phala* may be further processed by adding the] decoction of [one of the fifteen drugs, viz.,] (1) *sumukha*, (2) *surasa*, (3) *kuṭheraka*, (4) *kāṇḍīra*, (5) *kālamāla*, (6) *parṇāsaka*, (7) *kṣavaka*, (8) *phaṇijjhaka*, (9) *gṛñjana*, (10) *kāsa-marda*, (11) *bhṛṅgarāja*, (12) *poṭa*, (13) *ikṣuvālikā*, (14) *kālaṅkataka*, and (15) *daṇḍairaka* (*gundrā* or *nala*). From this paste, *śaṣkulīs* and *pūpas* may be prepared [and administered to the patient following the procedure earlier described in the paragraph no. 14]. [24-25]

In the paragraph no. 24, one recipe of *śaṣkulī* and the other recipe of *pūpa* are described to be prepared with the decoction of *madana-phala*. In addition, as described in the paragraph no. 25, by adding the decoctions of fifteen drugs, *śaṣkulīs* and *pūpas* (fifteen types each) are also described to be prepared. Thus,in the above texts, in total, sixteen types each of *śaṣkulīs* and *pūpas* are described.

Preparation of Madana-phala in the form of Badara-ṣāḍava, etc.

तथा बदरषाडव-राग-लेह-मोदकोत्कारिका-तर्पण-पानक-मांसरस-

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यूष-मद्यानां मदनफलान्यन्यतमेनोपसृज्य यथादोषरोगभक्ति दद्यात्; तैः साधु वमतीति।। २६।।

Seeds of *madana-phala* may be added to one of the preparations like (1) *badara-ṣāḍava* (name of a sour liquid prepared of jujube fruit), (2) *rāga* (an appetiser having sour and pungent tastes), (3) *leha* (linctus), (4) *modaka* (sweet-meat), (5) *utkārikā* (pan-cake), (6) *tarpaṇa* (demulcent drink), (7) *pānaka* (syrup), (8) *māṃsa-rasa* (meat-soup), (9) *yūṣa* (vegetable soup), or (10) *madya* (alcohol), and given to the patient, depending upon the state of the *doṣas*, nature of the disease and likings (proclivities). By these preparations the patient vomits well. [26]

In the above paragraph, ten recipes of *madana-phala* are described.

Synonyms of Madana-phala

मदनः करहाटश्च राठः पिण्डीतकः फलम्।
श्वसनश्चेति पर्यायैरुच्यते तस्य कल्पना।। २७।।

The recipes described in the previous paragraphs are those of the drug whose synonyms are : *madana, karahāṭa, rāṭha, piṇḍītaka, phala* and *śvasana*.

Since this drug is popularly used in several recipes, it is necessary to describe its various synonyms. Similarly, synonyms of other drugs will be described in the subsequent chapters of this section.

Contents of the Chapter

तत्र श्लोकाः-
नव योगाः कषायेषु, मात्रास्वष्टौ, पयोघृते।
पञ्च, फाणितचूर्णे द्वौ ग्रेये, वर्तिक्रियासु षट्।। २८।।
विंशतिर्विंशतिर्लेहमोदकोत्कारिकासु च।
शष्कुलीपूपयोश्चोक्ता योगाः षोडश षोडश।। २९।।
दशान्ये षाडवाद्येषु त्रयस्त्रिंशदिदं शतम्।
योगानां विधिवद्दिष्टं फलकल्पे महर्षिणा।। ३०।।

To sum up :

In this chapter dealing with the preparations of *madana-*

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phala the Great Sage (Ātreya) has described 133 recipes, as follows :

(1) Nine recipes in the form of decoction;
(vide para no. 14)

(2) Eight recipes in the form of *mātrā* (pills);
(vide para no. 16)

(3) Five recipes in the form of medicated milk and medicated ghee;
(vide para no. 17-18)

(4) One recipe to be used for inhalation;
(vide para no. 19)

(5) Two recipes in the form of treacle and powder;
(vide para no. 20)

(6) Six recipes in the form of *varti* (elongated pill);
(vide para no. 21)

(7) Twenty recipes in the form of linctus;
(vide para no. 22)

(8) Twenty recipes in the form of *utkārikā* (pan-cake);
(vide para no. 23)

(9) Twenty recipes in the form of *modaka* (sweet-meat);
(vide para no. 23)

(10) Sixteen recipes of *śaṣkulī* (a type of pan-cake);
(vide para no. 24-25)

(11) Sixteen recipes of *pūpa* (a type of sweet-meat); and
(vide para no. 24-25)

(12) Ten recipes prepared by adding *madana-phala* to *badara-ṣāḍava,* etc.
(vide para no; 26)

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढबलसंपूरिते कल्पस्थाने मदनकल्पो नाम प्रथमोऽध्यायः ।। १ ।।

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Thus, ends the first chapter of *Kalpa*-section dealing with the "Pharmaceutics of *Madana-phala*" of Agniveśa's work, as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - II

द्वितीयोऽध्यायः

(PHARMACEUTICS OF JĪMŪTAKA)

Prologue

अथातो जीमूतकल्पं व्याख्यास्यामः।। १।।
इति ह स्माह भगवानात्रेयः।। २।।

Now we shall expound the chapter dealing with the "Pharmaceutics of *Jīmūtaka*".

Thus, said Lord Ātreya. [1-2]

Kalpa-sthāna deals with six emetic drugs, viz., *madana-phala, jīmūtaka, ikṣvāku, dhāmārgava, vatsaka* and *kṛta-vedhana.* The former ones are less and less risky than the latter ones. Therefore, in the first chapter, *madana-phala* which is the least risky is described. In the subsequent chapters drugs which are less risky are described before the more risky ones. Oleation, fomentation and such other procedures as described in the previous chapter (vide para no. 14) are also to be followed for processing and administering the drug [*jīmūtaka*] being described in this chapter, and also the remaining four emetic drugs that are going to be described in the four subsequent chapters.

Synonyms of Jīmūtaka

कल्पं जीमूतकस्येमं फलपुष्पाश्रयं शृणु।
गरागरी च वेणी च तथा स्याद्देवताडकः।। ३।।

Now listen [addressed by Ātreya to Agniveśa] to the exposition on the pharmaceutics of *jīmūtaka* whose fruits and flowers are used in recipes, and whose synonyms are : *garāgarī, veṇī* and *devatāḍaka.* [3]

As described in the above text, only the fruits and flowers of *jīmūtaka* are used as emetics. By implication, other parts like leaves and branches of this plant are not useful in emesis.

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Therapeutic Effects of Jīmūtaka

जीमूतकं त्रिदोषघ्नं यथास्वौषधकल्पितम्।
प्रयोक्तव्यं ज्वरश्वासहिक्काद्येष्वामयेषु च।। ४।।

Jīmūtaka, taken with appropriate adjuvants cures all the three *doṣas*. It is useful in the treatment of fever, asthma, hiccup and such other disorders. [4]

Jīmūtaka taken with the *vāyu*-alleviating drugs alleviate *vāyu*. When taken along with *pitta*-alleviating drugs, it cures *pitta*. When taken along with *kapha*-alleviating drugs, it alleviates *kapha*.

Recipes of Jīmūtaka Prepared by Boiling with Milk

यथोक्तगुणयुक्तानां देशजानां यथाविधि।
पयः पुष्पेऽस्य, निर्वृत्ते फले पेया पयस्कृता।। ५।।
लोमशे क्षीरसंतानं, दध्युत्तरमलोमशे।
श्रृते पयसि दध्यम्लं जातं हरितपाण्डुके।। ६।।
जीर्णानां च सुशुष्काणां न्यस्तानां भाजने शुचौ।
चूर्णस्य पयसा शुक्तिं वातपित्तार्दितः पिबेत्।। ७।।

Jīmūtaka endowed with all the attributes, growing in appropriate land and collected according to the prescribed procedure as described before [for *madana-phala* in *Kalpa* 1 : 9, 10, 14] should be used, as follows :

(1) The flower should be boiled with milk and this milk should be used;

(2) The freshly appeared fruit should be boiled with milk and used as gruel;

(3) The fruit when covered with hair should be boiled with milk, and the cream taken out of it should be used;

(4) The fruit which has become free from hair should be boiled with milk, and the milk should be made to curds. The cream of this curd is to be used;

(5) The matured fruit which is green and yellowish should be boiled with milk. The sour curd prepared of this milk is to be used; and

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(6) Fully matured fruit which is dried should be kept in a clean container. One *śukti* (24 Gms.) of this fruit should be made to powder and taken by adding milk. This is useful for a patient who is suffering from ailments caused by *vāyu* and *pitta*. [5-7]

In the above mentioned text six recipes of *Jīmūtaka* prepared with milk are described.

Recipe of Jīmūtaka Prepared with Alcohol

आसुत्य च सुरामण्डे मृदित्वा प्रसुतं पिबेत्।
कफजेऽरोचके कासे पाण्डुरोगे सयक्ष्मणि।। ८।।

The [powder of the] fruit of *Jīmūtaka* should be soaked in *surā-maṇḍa* (supernatant part of alcohol) and kept overnight. Thereafter, the recipe should be stirred with hand and strained. The liquid thus obtained, should be taken by the patient suffering from anorexia caused by *kapha*, bronchitis, anemia and tuberculosis. [8]

For this and for such other preparations to be described later, the ripe fruit of *Jīmūtaka* should be used. As a general rule (unless otherwise specified) the fruit should be ripe and matured when it is to be used in a recipe.

Recipes of Jīmūtaka Prepared by Boiling in Decoctions

द्वे चापोथ्याथवा त्रीणि गुडूच्या मधुकस्य वा।
कोविदारादिकानां वा निम्बस्य कुटजस्य वा।। ९।।
कषायेष्वासुतं पूत्वा तेनैव विधिना पिबेत्।

Two or three fruits of *Jīmūtaka* should be boiled in the decoctions of [one of the twelve drugs, viz.,] (1) *guḍūcī*, (2) *madhuka*, (3) *kovidāra*, (4) *karbudāra*, (5) *nīpa*, (6) *vidula*, (7) *bimbī*, (8) *śaṇa-puṣpī*, (9) *sadā-puṣpī*, (10) *pratyak-puṣpī*, (11) *nimba* and (12) *kuṭaja*. Then the liquid should be fermented, filtered out and given to the patient according to the procedure prescribed for *madana-phala* (vide *kalpa* 1 : 14). [9 - $^{1}/_{2}$ 10]

In the above text, among others *karbudāra*, etc., are described to

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be used as decoctions. These seven drugs (item nos. 4 to 10 above) are described in *Kalpa* 1 : 14.

Thus, twelve recipes of *jīmūtaka* to be prepared by boiling with decoctions are described in the above text.

Recipes of Jīmūtaka Prepared by Adding Decoctions

अथवाऽऽरग्वधादीनां सप्तानां पूर्ववत् पिबेत्।। १०।।
एकैकस्य कषायेण पित्तश्लेष्मज्वरार्दितः।

Alternatively, the powder of *Jīmūtaka* should be taken along with the decoctions of one of (1) *āragvadha,* (2) *vṛkṣaka,* (3) *svādu-kaṇṭaka,* (4) *pāṭhā,* (5) *pāṭalā,* (6) *śārṅgeṣṭā* and (7) *mūrvā* by the patient suffering from fever caused by aggravated *pitta* and *kapha* according to the procedure described ealier (vide *Kalpa* 1 : 14). [$10^1/_2$-$^1/_2$11]

In the above text seven recipes of *Jīmūtaka* to be taken along with the decoctions are described.

These seven drugs beginning with *āragvadha* are described in *Kalpa* 1 : 22.

Recipes of Jīmūtaka Prepared in the form of Pills

मात्राः स्युः फलवच्चाष्टौ कोलमात्रास्तु ता मताः।। ११।।

Eight types of pills (*varti*) of *jīmūtaka* are to be prepared on the line suggested for *madana-phala* (vide *Kalpa* 1:16). The size of each of these pills should be like that of a *kola* (jujube fruit). [$11^1/_2$]

For the preparation of pills of *jīmūtaka,* the procedure laid down in respect of the pills of *madana-phala* in *Kalpa* 1 : 16 is to be followed. There the size of the pills of *madana-phala* is described to be that of either *harītakī, vibhītaka* or *āmalakī.* However, in the case of *jīmūtaka,* the size of the pills should be like *kola* (jujube fruit).

Recipes of Jīmūtaka to be Used with Juice

जीवकर्षभकेक्षूणां शतावर्या रसेन वा।
पित्तश्लेष्मज्वरे दद्याद्वातपित्तज्वरेऽथवा।। १२।।

The powder of *jīmūtaka* should be used along with the juice of one of the four drugs, viz., (1) *jīvaka,* (2) *ṛṣabhaka,*

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(3) *ikṣu*, or (4) *śatāvarī* in the treatment of fever caused either by *pitta* or *kapha* or by *vāyu* and *pitta*. [12]

In the above text four recipes of *jīmūtaka* to be taken along with the juice of drugs are described.

Recipe of Jīmūtaka Prepared in the form of Medicated Ghee

तथा जीमूतकक्षीरात् समुत्पन्नं पचेद्घृतम्।
फलादीनां कषायेण श्रेष्ठं तद्वमनं मतम्।। १३।।

From the milk boiled by adding *jīmūtaka*, ghee should be prepared. This ghee should be cooked by adding the decoction of *madana-phala*, etc. It is an excellent recipe [for emesis]. [13]

In the above text one recipe of medicated ghee prepared of *jīmūtaka* is described.

Contents of Chapter

तत्र श्लोकौ–
षट् क्षीरे मदिरामण्डे एको द्वादश चापरे।
सप्त चारग्वधादीनां कषायेऽष्टौ च वर्तिषु।। १४।।
जीवकादिषु चत्वारो घृतं चैकं प्रकीर्तितम्।
कल्पे जीमूतकानां च योगास्त्रिंशन्नवाधिकाः।। १५।।

To sum up :

There are thirty-nine recipes of *jīmūtaka*, as follows :

(1) Six recipes prepared by boiling milk with *jīmūtaka;* (vide verse nos. 5-7)

(2) One recipe prepared by soaking *jīmūtaka* in alcohol: (vide verse no. 8)

(3) Twelve recipes prepared by boiling with decoctions; (vide verse nos. 9-$^1/_2$ 10)

(4) Seven recipes to be used along with decoctions; (vide verse nos. 10$^1/_2$ - $^1/_2$ 11)

(5) Eight recipes in the form of pills (*varti*); (vide verse 11$^1/_2$)

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(6) Four recipes to be used along with the juice of *jīvaka*, etc.; and
(vide verse no. 12)

(7) One recipe of medicated ghee.
(vide verse no. 13) [14-15]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढबलसंपूरिते
कल्पस्थाने जीमूतककल्पो नाम द्वितीयोऽध्यायः।। २।।

Thus, ends the second chapter of *Kalpa-sthāna* dealing with the "Pharmaceutics of *jīmūtaka*" in Agniveśa's work as redacted by Caraka, and because of its non-availability supplemented by Dṛḍhabala.

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CHAPTER - III

तृतीयोऽध्यायः

(PHARMACEUTICS OF IKṢVĀKU)

Prologue

अथात इक्ष्वाकुकल्पं व्याख्यास्यामः।। १।।
इति ह स्माह भगवानात्रेयः।। २।।

We shall now expound the chapter dealing with the "Pharmaceutics of *Ikṣvāku*".

Thus, said Lord Ātreya. [1-2]

सिद्धं वक्ष्याम्यथेक्ष्वाकुकल्पं येषां प्रशस्यते।

I shall [hereafter] explain the effective recipes of *ikṣvāku,* and the types of patients for whom these are very useful. [$^{1}/_{2}$ 3]

Synonyms

लम्बाऽथ कटुकालाबूस्तुम्बी पिण्डफला तथा।। ३।।
इक्ष्वाकुः फलिनी चैव प्रोच्यते तस्य कल्पना।

[Synonyms of *ikṣvāku*] are *lambā, kaṭukālābū, tumbī, piṇḍa-phalā,* and *phalinī*. Its recipes will be described [hereafter]. [$3^{1}/_{2}$ - $^{1}/_{2}$4]

Effects of Ikṣvāku

कासश्वासविषच्छर्दिज्वरार्ते कफकर्षिते।। ४।।
प्रताम्यति नरे चैव वमनार्थं तदिष्यते।

It is useful as emetic for patients suffering from cough, asthma, toxicosis, vomiting and fever, for those whose *kapha* is dried up, and for those who are distressed with palpitation. [$4^{1}/_{2}$ - $^{1}/_{2}$5]

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Recipes of Ikṣvāku Prepared with Milk and Alcohol

अपुष्पस्य प्रवालानां मुष्टिं प्रादेशसंमितम्।। ५।।
क्षीरप्रस्थे श्रृतं दद्यात् पित्तोद्रिक्ते कफज्वरे।
पुष्पादिषु च चत्वारः क्षीरे जीमूतके यथा।। ६।।
योगा हरितपाण्डूनां सुरामण्डेन पञ्चमः।
फलस्वरसभागं च त्रिगुणक्षीरसाधितम्।। ७।।
उरःस्थिते कफे दद्यात् स्वरभेदे च पीनसे।
जीर्णे मध्योद्धृते क्षीरं प्रक्षिपेत्तद्यदा दधि।। ८।।
जातं स्यात् सकफे कासे श्वासे वम्यां च तत् पिबेत्।
अजाक्षीरेण बीजानि भावयेत् पाययेत च।। ९।।
विषगुल्मोदरग्रन्थिगण्डेषु श्लीपदेषु च।

Eight milk preparations and one alcoholic preparation of *ikṣvāku* are as follows :

(1) One *prastha* of milk should be boiled by adding one loose fistful of *ikṣvāku*-sprouts which have not yet put forth flowers, and should be given to the patient suffering from *kaphaja* type of fever associated with aggravated *pitta*. (To this recipe four *prasthas* of water should also be added while boiling).

(2-5) As per the description of the recipes of *jīmūtaka* in the earlier chapter (vide *Kalpa* 2 : 5-6), four types of milk preparations are to be made out of the flowers, etc., of *ikṣvāku*.

(6) Alcoholic preparation : The matured fruits of *ikṣvāku* which is green and yellowish should be kept soaked in *surā-maṇḍa* (supernatant part of alcohol) [following the procedure described in *Kalpa 2 : 8*]. This constitutes the fifth recipe of flowers and fruits. (The earlier four recipes are already described above in item nos. 2-5).

(7) One part of the juice of *ikṣvāku* should be boiled by adding three parts of milk (and four times of water). This should be administered to the patient whose chest is afflicted with aggravated *kapha*, and who is

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suffering from hoarseness of voice (*svara-bheda*) as well as coryza (*pīnasa*).

(8) The pulp of a ripe fruit of *ikṣvāku* should be removed and in this shell, milk should be kept for such a period till it gets converted into curd. This curd should be taken by the patient suffering from cough with phlegm, asthma and vomiting.

(9) Seeds of *ikṣvāku* should be impregnated with goat's milk. This milk should be given as a potion to a patient suffering from toxicosis, *gulma* (phantom tumour), *udara* (obstinate abdominal diseases including ascites), *granthi* (nodules), *gaṇḍa* (enlargement of thyroid gland) and *ślīpada* (elephantiasis). [$5^{1}/_{2}$ - $^{1}/_{2}10$]

In the above text, eight milk preparations and one alcoholic preparation of *ikṣvāku* are described.

Recipe of Ikṣvāku to be taken with Whey

मस्तुना वा फलान्मध्यं पाण्डुकुष्ठविषार्दितः।। १०।।

The pulp of *ikṣvāku* should be mixed with whey and taken by the patient suffering from anemia, *kuṣṭha* (obstinate skin diseases including leprosy) and toxicosis. [$10^{1}/_{2}$]

Recipe of Ikṣvāku to be Prepared by Boiling with Butter-milk

तेन तक्रं विपक्वं वा सक्षौद्रलवणं पिबेत्।

The pulp of *ikṣvāku* boiled by adding butter-milk, and mixed with honey and salt may be taken (for emesis).

[$^{1}/_{2}11$]

Recipe of Ikṣvāku for Inhalation

तुम्ब्या फलरसैः शुष्कैः सपुष्पैरवचूर्णितम्।। ११।।
छर्दयेन्माल्यमाघ्राय गन्धसंपत्सुखोचितः।

The juice and powder of dried flowers of *ikṣvāku* should be sprinkled over a garland. The patients habituated to pleasant smell will vomit by the very smell of this garland of flowers.

[$11^{1}/_{2}$ - $^{1}/_{2}$ 12]

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Recipes of Ikṣvāku with Jaggery, etc.

भक्षयेत् फलमध्यं वा गुडेन पललेन च।। १२।।
इक्ष्वाकुफलतैलं वा सिद्धं वा पूर्ववद्घृतम्।

For emesis, the pulp of *ikṣvāku* may be taken along with jaggery or oil-cake.

The medicated oil prepared with the paste of the fruit of *ikṣvāku* shall cause vomiting.

The medicated ghee prepared on the lines suggested earlier (in *Kalpa* 2 : 13) also causes vomiting.[$12^1/_2$ - $^1/_2$13]

Recipe of Ikṣvāku Used by Increasing Number of Seeds

पञ्चाशद्दशवृद्धानि फलादीनां यथोत्तरम्।। १३।।
पिबेद्विमृद्य बीजानि कषायेष्वाशतं पृथक्।

The seeds of *ikṣvāku* beginning with fifty in number should be gradually increased by tens till the number comes to one hundred. Thus, either 50, 60, 70, 80, 90 or 100 seeds of *ikṣvāku* should be crushed and added to the decoctions of one of the six plants, (viz., *madana-phala, jīmūtaka, ikṣvāku, dhāmārgava, vatsaka* and *kṛtavedhana*), and used for emesis.
[$13^1/_2$ - $^1/_2$ 14·]

In the above text, six recipes of *ikṣvāku*, depending upon the number of seeds (viz., 50, 60, 70, 80, 90 or 100) or the number of decoctions (which is also six) to be used for emesis are described.

Recipes of Ikṣvāku to be Used With Decoctions

यष्ट्याह्वकोविदाराद्यैर्मुष्टिमन्तर्नखं पिबेत्।। १४।।

One closed fistful of the seeds of *ikṣvāku* should be taken along with the decoctions (nine) of any one of (1) *yaṣṭimadhu,* (2) *kovidāra,* [(3) *karbudāra,* (4) *nīpa,* (5) *vidula,* (6) *bimbī,* (7) *śaṇa-puṣpī,* (8) *sadā-puṣpī* or (9) *pratyak-puṣpī*] for emesis. [$14^1/_2$]

In the above text, nine recipes of *ikṣvāku* to be taken along with decoctions of nine drugs are described.

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Recipe of Ikṣvāku in the form of Pills

कषायैः कोविदाराद्यैर्मात्राश्च फलवत् स्मृताः।

By adding the decoctions of any one of *kovidāra*, [*karbudāra, nīpa, vidula, bimbī, śaṇa-puṣpī, sadā-puṣpī* or *pratyak-puṣpī*], pills (*mātrās*) should be prepared out of *ikṣvāku* on the lines suggested for *madana-phala* (vide *Kalpa* 1 : 16), and used for emesis. [$^{1}/_{2}15$]

In the above text, eight different recipes of *ikṣvāku* prepared by adding one of the eight decoctions are described.

Recipes of Ikṣvāku in the form of Linctus

बिल्वमूलकषायेण तुम्बीबीजाञ्जलिं पचेत्।। १५।।
पूतस्यास्य त्रयो भागाश्चतुर्थः फाणितस्य तु।
सघृतो बीजभागश्च पिष्टानर्धांशिकांस्तथा।। १६।।
महाजालिनिजीमूतकृतवेधनवत्सकान् ।
तं लेहं साधयेद्दर्व्या घट्टयन्मृदुनाऽग्निना।। १७।।
यावत् स्यात्तन्तुमत्तोये पतितं तु न शीर्यते।
तं लिहन्मात्रया लेहं प्रमथ्यां च पिबेदनु।। १८।।
कल्प एषोऽग्निमन्थादौ चतुष्के पृथगुच्यते।

One *añjali* (192 Gms.) of the seeds of *ikṣvāku* should be boiled by adding (eight *añjalis*) of the decoction of the root of *bilva* till the liquid is reduced to one fourth. To three parts of this strained decoction, one part of *phāṇita* (treacle or half boiled sugar-cane juice) and one part of ghee should be added. To this, half parts each of the paste of *mahā-jālinī (pīta-koṣātakī), jīmūtaka, kṛtavedhana (jyotsnikā)* and *vatsaka* should be added.

The linctus should be prepared by cooking over mild fire and by stirring with the help of a large spoon till the stuff becomes thick in consistency, and threads appear when a part of it is pulled out, and it does not spread when a part of it is put into water.

This linctus should be taken in appropriate dose and

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thereafter, *pramathyā* (decoction of digestion-stimulant drugs) should be used as post-prandial drink.

Similarly, recipes of linctus of *ikṣvāku*-seeds can be prepared by adding the decoction of the roots of one of *agni-mantha, (śyonāka, pāṭalā* and *gambhārī)* separately.

[$15^{1}/_{2}$ - $^{1}/_{2}$ 19]

Five different varieties of linctus of *ikṣvāku*-seeds are described in the above text - one each in the decoction of the roots of *bilva, agnimantha, śyonāka, pāṭalā* and *gambhārī*. These five roots are collectively called "*pañca-mūla*" (vide *Cikitsā* 1 : 1 : 43).

In the place of "*caturthaḥ phāṇitasya tu*", some texts read "*trayaḥ trikaṭukasya ca*", i.e. three parts of *trikaṭu* (*śuṇṭhī*, *pippalī* and *marica*) should be used [in the place of one part of *phāṇita*].

In the above text the procedure of cooking a recipe of linctus is described. At the time of final cooking, if a part of the thick stuff is pulled out of the pan, then threads appear and if a portion of it is placed in water, it continues to remain as such and does not get disintegrated. This process is to be followed in respect of other linctus preparations.

Three recipes of *pramathyā* are described in *Cikitsā* 19 : 20-21. Any one of these three recipes can be used as post-prandial drink.

In some editions of this work, the term '*mantha*' (thin gruel) is mentioned in the place of '*pramathyā*'.

Recipe of Ikṣvāku to be Used along with Mantha

शक्तुभिर्वा पिबेन्मन्थं तुम्बीस्वरसभावितैः।। १९।।
कफजेऽथ ज्वरे कासे कण्ठरोगेष्वरोचके।

Śaktu (roasted barley flour) should be impregnated with the juice of *tumbī (ikṣvāku)*. The *mantha* (thin gruel) prepared of this *śaktu* should be taken as a potion by the patient suffering from *kaphaja* type of fever, cough, diseases of the throat and anorexia. [$19^{1}/_{2}$ - $^{1}/_{2}$20]

Recipe of Ikṣvāku to be Taken along with Meat-soup

गुल्मे मेहे प्रसेके च कल्कं मांसरसैः पिबेत्।
नरः साधु वमत्येवं न च दौर्बल्यमश्नुते।। २०।।

The paste of [the seeds of] *ikṣvāku* should be taken with

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meat-soup in *gulma* (phantom tumour), *meha* (obstinate urinary disorders including diabetes) and *praseka* (ptyalism). By this, the person gets vomiting easily and does not suffer from weakness. [$20^2/_3$]

Contents of Chapter

तत्र श्लोकाः–
पयस्यष्टौ सुरामण्ड-मस्तु-तक्रेषु च त्रयः।
घ्रेयं सपललं तैलं वर्धमानाः फलेषु षट्।। २१।।
घृतमेकं कषायेषु नवान्ये मधुकादिषु।
अष्टौ वर्तिक्रिया लेहाः पञ्च मन्थो रसस्तथा।। २२।।
योगा इक्ष्वाकुकल्पे ते चत्वारिंशच्च पञ्च च।
उक्ता महर्षिणा सम्यक् प्रजानां हितकाम्यया।। २३।।

To sum up :

In this chapter on the Pharmaceutics of *Ikṣvāku*, the great sage, with the healthy well being of the people in view, has described forty five recipes of *ikṣvāku* which are as follows :

(1) Eight recipes prepared with milk;
(vide verse nos. 5-10)

(2) One recipe with *surā-maṇḍa* (supernatant part of alcohol);
(vide verse no. 7)

(3-4) Two recipes one each of whey and butter-milk;
(vide verse no. 10-11)

(5) One recipe for inhalation;
(vide verse no. 11-12)

(6) One recipe to be taken with *palala* (oil-cake);
(vide verse no. 12)

(7) One recipe of medicated oil;
(vide verse no. 13)

(8) Six recipes with increased number of seeds;
(vide verse no. 13-14)

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(9) One recipe of medicated ghee;
(vide verse no. 13)

(10) Nine recipes to be taken along with decoctions of *yaṣṭimadhu* or other drugs;
(vide verse no. 14)

(11) Eight recipes in the form of pills;
(vide vese no. 15)

(12) Five recipes of linctus;
(vide verse nos 15-19)

(13) One recipe of medicated *śaktu*; and
(vide verse nos. 19-20)

(14) One recipe to be taken along with meat-soup.
(vide verse no. 20) [21-23]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढ-
बलसंपूरिते कल्पस्थाने इक्ष्वाकुकल्पो नाम
तृतीयोऽध्यायः।। ३।।

Thus, ends the third chapter of *Kalpa-sthāna* dealing with the "Pharmaceutics of *Ikṣvāku*" in Agniveśa's work as redacted by Caraka, and because of its non-availability supplemented by Dṛḍhabala.

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CHAPTER - IV

चतुर्थोऽध्यायः

(PHARMACEUTICS OF DHĀMĀRGAVA)

Prologue

अथातो धामार्गवकल्पं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

Now we shall expound the chapter dealing with the "Pharmaceutics of *Dhāmārgava*".

Thus, said Lord Ātreya. [1-2]

Synonyms of Dhāmārgava

कर्कोटकी कोठफला महाजालिनिरेव च।
धामार्गवस्य पर्याया राजकोशातकी तथा।।३।।

The synonyms of *dhāmārgava (pīta-ghoṣaka)* are *karkoṭakī, koṭha-phalā, mahā-jālini* and *rāja-kośātakī.*

Therapeutic Effects

गरे गुल्मोदरे कासे वाते श्लेष्माशयस्थिते।
कफे च कण्ठवक्रस्थे कफसंचयजेषु च।।४।।
रोगेष्वेषु प्रयोज्यं स्यात् स्थिराश्च गुरवश्च ये।

Dhāmārgava is useful in the treatment of stable and obstinate diseases including toxicosis, *gulma* (phantom tumour), *udara* (obstinate abdominal diseases including ascites), cough, ailments caused by the localization of aggravated *vāyu* in the habitat of *kapha*, diseases of the throat and mouth and other diseases caused by the accumulation of *kapha.* [4 - $^{1}/_{2}$5]

Recipes of Dhāmārgava to be Used with Decoctions

फलं पुष्पं प्रवालं च विधिना तस्य संहरेत्।।५।।

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प्रवालस्वरसं शुष्कं कृत्वा च गुलिकाः पृथक्।
कोविदारादिभिः पेयाः कषायैर्मधुकस्य च।। ६।।

The fruits, flowers and tender leaves of *dhāmārgava* should be collected according to prescribed procedure. The juice of the tender leaves of *dhāmārgava* should be dried and made to pills. These pills are to be taken as a potion mixed with the decoction of one of the drugs, viz. *kovidāra, (karbudāra, nīpa, vidula, bimbī, śaṇa-puṣpī, sadā-puṣpī, pratyak-puṣpī*) or *yaṣṭi-madhu.* [6]

These pills of *dhāmārgava* are stated in the above text to be taken with the decoctions of any one of the nine different drugs separately, thus constituting nine different recipes.

Recipes of Dhāmārgava Prepared with Milk and Alcohol

पुष्पादिषु पयोयोगाश्चत्वारः पञ्चमी सुरा।
पूर्ववत् .....

Four milk preparations and one alcoholic preparation of *dhāmārgava* should be made according to the procedure described before (vide *Kalpa* 2 : 5-6). [$^{3}/_{4}$ 7]

Recipes of Dhāmārgava Prepared with Decoctions

.....जीर्णशुष्काणामतः कल्पः प्रवक्ष्यते।। ७।।
मधुकस्य कषायेण बीजकण्ठोद्धृतं फलम्।
सगुडं व्युषितं रात्रिं कोविदारादिभिस्तथा।। ८।।
दद्याद्गुल्मोदरार्तेभ्यो ये चाप्यन्ये कफामयाः।

Now the recipes prepared of matured and dried fruits of *dhāmārgava* will be described.

The seeds of *dhāmārgava* should be removed from the fruit. The fruit should then be filled up with the decoctions of *yaṣṭi-madhu* mixed with jaggery and kept overnight. Similarly, the fruit can be filled up with jaggery mixed with the decoctions of one of *kovidāra, (karbudāra, nīpa, vidula, bimbī, śaṇa-puṣpī, sadā-puṣpī* or *pratyak-puṣpī,*) and kept overnight. These (nine) decoctions are to be used [for emesis] to patients

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suffering from *gulma* (phantom tumour), *udara* (obstinate abdominal diseases including ascites) and other diseases caused by *kapha*. [$7^1/_4$ - $^1/_2$9]

Nine recipes of *dhāmārgava* with nine different decoctions are described in the above text.

This process of taking out the seeds of *dhāmārgava* and filling it with jaggery is also described in *Jatūkarṇa*.

Emetic therapy is generally contra-indicated for patients suffering from *gulma* (phantom tumour). But in certain stages of this ailment emetic therapy is useful for which it is described here.

Recipe of Dhāmārgava to be Given with Food

दद्यादन्नेन संयुक्तं छर्दिहृद्रोगशान्तये।। ९।।

The powder of *dhāmārgava* should be added to food and given for the alleviation of vomiting and cardiac ailments. [$9^1/_2$]

Recipe of Dhāmārgava for Inhalation

चूर्णैर्वाऽप्युत्पलादीनि भावितानि प्रभूतशः।
रसक्षीरयवाग्वादितृप्तो घ्रात्वा वमेत् सुखम्।। १०।।

Flowers of *utpala*, etc., should be impregnated with the powder of *dhāmārgava* for several times. The patient having taken *rasa* (meat-soup), milk, gruel, etc., sumptuously should inhale the smell of this impregnated flower which causes emesis with ease. [10]

In addition to *utpala* (water lily) other flowers like *saugandhika* (red variety of water lily) and lotus may also be used in such preparations.

Recipes of Dhāmārgava in Pill-form

चूर्णीकृतस्य वर्तिं वा कृत्वा बदरसंमिताम्।
विनीयाञ्जलिमात्रे तु पिबेद् गोऽश्वशकृद्रसे।। ११।।
पृषतर्ष्यकुरङ्गाह्वगजोष्ट्राश्वतराविके ।
श्वदंष्ट्रखरखड्गानां चैवं पेया शकृद्रसे।। १२।।

Alternatively, with the powder of *dhāmārgava*, the pill of the size of *kola* (jujube-fruit) should be prepared. This pill

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should be mixed with one *añjali* (192 ml.) of the juice of cow-dung or horse-dung, and taken [for emesis].

This pill may also be used after mixing with the juice of the dung of *pṛṣata (bindu-citra-hariṇa), ṛṣya (nīlāṇḍa), kuraṅga (cañcala-gati), gaja* (elephant), *uṣṭra* (camel), *aśva-tara (vegasara), avika* (sheep), *śvadaṃṣṭra* (mouse-deer), *khara* (ass) and *khaḍga* (rhinoceros) [for emesis]. [11-12]

In the above verses twelve recipes of *dhāmārgava* are described.

Recipes of Dhāmārgava in the form of Linctus

जीवकर्षभकौ वीरामात्मगुप्तां शतावरीम्।
काकोलीं श्रावणीं मेदां महामेदां मधूलिकाम्।। १३।।
एकैकशोऽभिसंचूर्ण्य सह धामार्गवेण ते।
शर्करामधुसंयुक्ता लेहा हृद्दाहकासिनाम्।। १४।।
सुखोदकानुपानाः स्युः पित्तोष्मसहिते कफे।

Jīvaka, ṛṣabhaka, vīrā, ātma-guptā, śatāvarī, kākolī, śrāvaṇī, medā, mahā-medā and *madhūlikā (markaṭa-hasta)* should be made to powders separately. Each one of these powders should be added with (equal quantity of) the powder of *dhāmārgava,* and by adding honey as well as sugar, a linctus should be prepared. These (ten emetic recipes) are useful in *hṛd-dāha* (burning sensation in the cardiac region) and cough. Tepid water should be given as post-prandial drink (*anupāna*) if aggravated *kapha* is associated with *pitta* which is hot in nature. [13 - $^1/_2$ 15]

Recipe of Dhāmārgava in the form of Kalka

धान्यतुम्बुरुयूषेण कल्कः सर्वविषापहः।। १५।।

Administration of the paste of *dhāmārgava* along with the decoction of *dhānya* and *tumburu* [as emetic] cures all forms of toxicosis. [$15^1/_2$]

This recipe is described in the work of *Jatūkarṇa* also.

Recipes of Dhāmārgava Along With Decoction

जात्याः सौमनसायिन्या रजन्याश्चोरकस्य च।

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वृश्चीरस्य महाक्षुद्रसहाहैमवतस्य च।।१६।।
बिम्ब्याः पुनर्नवाया वा कासमर्दस्य वा पृथक्।
एकं धामार्गवं द्वे वा कषाये परिमृद्य तु।।१७।।
पूतं मनोविकारेषु पिबेद्वमनमुत्तमम्।

Decoction should be prepared out of each of *jātī, saumanasyāyinī (yūthikā), rajanī (haridrā), coraka, vṛścīra* (white variety of *punarnavā*), *mahā-sahā (mudga-parṇī), kṣudra-sahā (māṣa-parṇī), haimavatī (vacā), bimbī, punarnavā* (red vareity) and *kāsamarda* separately. Each of these [eleven] decoctions should be added with [the powder of] one or two fruits of *dhāmārgava,* squeezed, and filtered. These are excellent recipes for emesis in psychic disorders (*mano-vikāra*). [16 - $^{1}/_{2}$ 18]

In the above text, eleven recipes of *dhāmārgava* prepared with decoctions are described.

Recipe of Dhāmārgava in the form of Medicated Ghee

तच्छृतक्षीरजं सर्पिः साधितं वा फलादिभिः।।१८।।

Dhāmārgava should be boiled with milk, and from out of this milk ghee should be prepared. This ghee should be cooked by adding the decoctions of *madana-phala*, etc. [This is useful as emetic.] [$18^{1}/_{2}$]

Contents of Chapter

तत्र श्लोकौ–
पल्लवे नव चत्वारः क्षीर एकः सुरासवे।
कषाये विंशतिः कल्के दश द्वौ च शकृद्रसे।।१९।।
अन्न एकस्तथा घ्रेये दश लेहास्तथा घृतम्।
कल्पे धामार्गवस्योक्ताः षष्टिर्योगा महर्षिणा।।२०।।

To sum up :

The great sage has described sixty recipes of *dhāmārgava* as follows :

(1) Nine recipes of tender leaves;
(vide verse no. 6)

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(2) Four recipes prepared by boiling with milk;
(vide verse no. 7)

(3) One recipe prepared with alcohol;
(vide verse no. 7)

(4) Twenty recipes prepared with decoctions;
(nine in verse nos. 7-9, and eleven in verse nos. 16-18)

(5) One recipe in the form of paste;
(vide verse no. 15)

(6) Twelve recipes to be used along with the juice of dungs of various animals;
(vide verse nos. 11-12)

(7) One recipe to be taken along with food;
(vide verse no. 9)

(8) One recipe for inhalation;
(vide verse no. 10)

(9) Ten recipes in the form of linctus; and
(vide verse nos. 13-15)

(10) One recipe of medicated ghee.
(vide verse no. 18) [19-20]

While summarising, the order as given in the text has been slightly changed perhaps for metrical convenience.

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढ-
बलसंपूरिते कल्पस्थाने धामार्गवकल्पो नाम
चतुर्थोऽध्यायः।। ४।।

Thus, ends the fourth chapter of *Kalpa-sthāna* dealing with the "Pharmaceutics of *Dhāmārgava*" in Agniveśa's work as redacted by Caraka, and because of its non-availability supplemented by Dṛḍhabala.

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CHAPTER - V

पञ्चमोऽध्यायः

(PHARMACEUTICS OF VATSAKA)

Prologue

अथातो वत्सककल्पं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

Now we shall expound the chapter dealing with the "Pharmaceutics of *Vatsaka*".

Thus, said Lord Ātreya. [1-2]

In *Kalpa* 1:6, emetic and purgative drugs are described in a particular sequence. In the same order pharmaceutics of different drugs are being described in this section. Therefore, after the pharmaceutics of *dhāmārgava,* that of *kuṭaja* (*vatsaka*) is being described in this present chapter.

Varieties and Synonyms of Vatsaka

अथ वत्सकनामानि भेदं स्त्रीपुंसयोस्तथा।
कल्पं चास्य प्रवक्ष्यामि विस्तरेण यथातथम्।।३।।
वत्सकः कुटजः शक्रो वृक्षको गिरिमल्लिका।
बीजानीन्द्रयवास्तस्य तथोच्यन्ते कलिङ्गकाः।।४।।
बृहत्फलः श्वेतपुष्पः स्निग्धपत्रः पुमान् भवेत्।
श्यामा चारुणपुष्पा स्त्री फलवृन्तैस्तथाऽणुभिः।।५।।

I shall hereafter describe appropriately the synonyms of *vatsaka,* distinctive features of its female and male varieties, and its recipes in detail.

Synonyms of *vatsaka* are : *kuṭaja, śakra, vṛkṣaka* and *giri-mallikā*. Its seeds are called *indra-yava* and *kaliṅgaka.*

The male variety of *vatsaka* has big fruits, white flowers and smooth (unctuous) leaves. The female variety has bluish

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black and pink flowers. It has tiny fruits as well as tiny stalks. [3-5]

Both the female and male varieties of *vatsaka* have similar attributes as well as therapeutic effects. Both the varieties, therefore, can be used in all the recipes to be elaborated hereafter. Only to facilitate their identification, these distinctive features of both varieties are described in the above text.

Therapeutic Effects of Vatsaka

रक्तपित्तकफघ्नस्तु सुकुमारेष्वनत्ययः।
हृद्रोगज्वरवातासृग्वीसर्पादिषु शस्यते।। ६।।

Vatsaka cures *rakta-pitta* (an ailment characterized by bleeding from various parts of the body) and *kapha*, and is useful for patients suffering from heart diseases, fever, *vāta-rakta* (gout) and *visarpa* (erysipelas). It is free from any adverse effects even if administered to persons of tender health. [6]

Recipes of Vatsaka in the form of Decoction

काले फलानि संगृह्य तयोः शुष्काणि निक्षिपेत्।
तेषामन्तर्नखं मुष्टिं जर्जरीकृत्य भावयेत्।। ७।।
मधुकस्य कषायेण कोविदारादिभिस्तथा।
निशि स्थितं विमृद्यैतल्लवणक्षौद्रसंयुतम्।। ८।।
पिबेत्तद्वमनं श्रेष्ठं पित्तश्लेष्मनिबर्हणम्।

Fruits of both the varieties of *vatsaka* should be collected in appropriate time (season), dried and coarsely powdered. A closed-fist of this powder should be impregnated by adding the decoction of *madhuka, kovidāra, (karbudāra, nīpa, vidula, bimbī, śaṇa-puṣpī, sadā-puṣpī* or *pratyak-puṣpī*). After keeping soaked for the night, the powder and decoction should be stirred [and filtered]. After adding salt and honey, this liquid (decoction) should be taken as potion. These are the excellent emetic recipes for the elimination of *pitta* and *kapha*.

[7 - $^{1}/_{2}$ 9]

Nine recipes of *vatsaka* are described in the above text with the decoctions of nine different drugs. Eventhough salt and honey are added

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to all the emetic recipes, their mention in the above text indicates that these two ingredients are to be used in these recipes in large quantities.

Recipes of Vatsaka in Powder Form

अष्टाहं पयसाऽऽर्केण तेषां चूर्णानि भावयेत्।। ९।।
जीवकस्य कषायेण ततः पाणितलं पिबेत्।
फलजीमूतकेक्ष्वाकुजीवन्तीनां पृथक् तथा।। १०।।

The powder [of the fruits of *vatsaka*] is to be impregnated in the milky latex of *arka* for eight days. One *pāṇi-tala* of this should be taken along with the decoction of *jīvaka*.

Similarly, this powder can be taken separately with the decoctions of *madana-phala, jīmūtaka, ikṣvāku* or *jīvantī*. [$9^{1}/_{2}$ - 10]

In the above text five recipes of *vatsaka* in powder form are described.

Recipe of Vatsaka to be taken with Water

सर्षपाणां मधूकानां लवणस्याथवाऽम्बुना।

The powder of *vatsaka* [processed as per the above description] may be taken along with water mixed with the powder of *sarṣapa, madhūka* or salt. [$^{1}/_{2}$ 11]

In the above text, three recipes to be taken along with water (by adding three different ingredients) are described.

Recipe of Vatsaka to be taken with Kṛśara

कृशरेणाथवा युक्तं विदध्याद्वमनं भिषक्।। ११।।

The powder of *vatsaka* [processed as per the above description in the verse no. 7-8] may also be added to *kṛśara* (a preparation of rice and pulses), and administered by the physician [to the patient] for emesis. [$11^{1}/_{2}$]

Contents of Chapter

तत्र श्लोकः–
कषायैर्नव चूर्णैश्च पञ्चोक्ताः सलिलैस्त्रयः।
एकश्च कृशरायां स्याद्योगास्तेऽष्टादश स्मृताः।। १२।।

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To sum up :

Eighteen recipes of *vatsaka* are described [in this chapter] as follows :

(1) Nine recipes in the form of decoctions; (vide verse nos. 7-9)

(2) Five recipes in powder form; (vide verse no. 9-10)

(3) Three recipes to be taken along with water; and (vide verse no. 11)

(4) One recipe to be taken with *kṛśara.* (vide verse no. 11) [12]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढ-
बलसंपूरिते कल्पस्थाने वत्सककल्पो नाम
पञ्चमोऽध्यायः ।। ५ ।।

Thus, ends the fifth chapter of *Kalpa-sthāna* dealing with the "Pharmaceutics of *Vatsaka*" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - VI

षष्ठोऽध्यायः

(PHARMACEUTICS OF KṚTAVEDHANA)

Prologue

अथातः कृतवेधनकल्पं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

Now we shall expound the chapter dealing with the "Pharmaceutics of *Kṛtavedhana*".

Thus, said Lord Ātreya. [1-2]

This is the last chapter on the pharmaceutics of emetic drugs.

Synonyms of Kṛtavedhana

कृतवेधननामानि कल्पं चास्य निबोधत।
क्ष्वेडः कोशातकी चोक्तं मृदङ्गफलमेव च।। ३।।

Now listen to the synonyms of *kṛtavedhana*, and its recipes.

Its synonyms are : *kṣveḍa, kośātakī* and *mṛdaṅga-phala.* [3]

Attributes and Therapeutic Effects of Kṛta-vedhana

अत्यर्थकटुतीक्ष्णोष्णं गाढेष्विष्टं गदेषु च।
कुष्ठपाण्ड्वामयप्लीहशोफगुल्मगरादिषु।। ४।।

It is exceedingly pungent, sharp and hot. It is useful in deep-seated diseases, viz., *kuṣṭha* (obstinate skin diseases including leprosy), anemia, splenic disorders, *śopha* (oedema), *gulma* (phantom tumour), toxicosis, etc. [4]

Recipes of Kṛtavedhana Prepared with Milk and Alcohol

क्षीरादि कुसुमादीनां सुरा चैतेषु पूर्ववत्।

Preparations of the flower, etc., [of *kṛtavedhana*] along

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with milk and alcohol should be made on the line suggested before, [and used for emesis]. [$^1/_2$ 5]

These preparations are to be made as per the method described in respect of *jīmūtaka* (vide *Kalpa* 2 : 5-6) details of which are as follows:

(1) The flowers of *kṛta-vedhana* should be boiled with milk and this milk should be used;

(2) The freshly appearing fruit should be boiled with milk and used as gruel;

(3) The fruit when it is covered with hair should be boiled with milk and the cream taken out of it is to be used; and

(4) The fruit when it is free from hair should be boiled with milk and the milk should be made to curds. The cream of this curd is to be used.

Though some of the above mentioned recipes are not exactly milk preparations, still these are prepared of milk derivatives like *yoghurt* for which these are enumerated in the verse no. 13 as milk preparations.

The alcoholic preparation of *kṛta-vedhana* is to be done following the method prescribed for *jīmūtaka* (vide *Kalpa* 2 : 8).

Recipes of Kṛta-vedhana to be taken Along with Decoctions

सुशुष्काणां तु जीर्णानामेकं द्वे वा यथाबलम्।। ५।।
कषायैर्मधुकादीनां नवभिः फलवत् पिबेत्।

Depending upon his strength, the patient should take one or two of the ripe fruits of *kṛta-vedhana* along with the decoctions of any one of the nine drugs, viz., *madhuka, (kovidāra, karbudāra, nīpa, vidula, bimbī, śaṇa-puṣpī, sadā-puṣpī* or *pratyak-puṣpī*). This potion is to be used according to the procedure prescribed for *madana-phala* (vide *Kalpa* 1:14). [$5^1/_2$ - $^1/_2$ 6]

In the above text, nine preparations of *kṛta-vedhana* to be taken along with decoctions are described.

Recipes of Kṛta-vedhana in the form of Linctus

क्वाथयित्वा फलं तस्य पूत्वा लेहं निधापयेत्।। ६।।
कृतवेधनकल्कांशं फलाद्यर्धांशसंयुतम्।

The decoction of the fruit of *kṛta-vedhana* should be

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prepared and filtered. To this liquid, one part of the paste of *kṛta-vedhana* and half part of the paste of *madana-phala,* etc., should be added. This should be cooked, made to a linctus and used for emesis. [$6^{1}/_{2}$ -$^{1}/_{2}$7]

[It appears from Cakrapāṇi's commentary that the above text was not available in the *Caraka-saṃhitā* which was in his possession. He has quoted the text and agreed to its inclusion because of a similar text available in *Jatūkarṇa-saṃhitā*. According to him, these nine recipes of linctus are only supplementary ones of nine decoctions described earlier in verse nos. 5-6. Therefore, these recipes of linctus are not described in the contents of this chapter, summarised in verse nos. 13-14].

Recipes of Kṛta-vedhana in the Form of Decoction

पृथक् चारग्वधादीनां त्रयोदशभिरासुतम्।। ७।।

The powder of *kṛta-vedhana* may be macerated with the decoctions of any one of the thirteen drugs, viz., *āragvadha, (vṛkṣaka, svādu-kaṇṭaka, pāṭhā, pāṭalā, śārṅgeṣṭā, mūrvā, sapta-parṇa, nakta-māla, picumarda, paṭola, suṣavī* and *guḍūcī).* [These recipes may be used for emesis.] [7 $^{1}/_{2}$]

In the verse no. 5, nine recipes in the form of decoctions are described. In the above text (verse no. 7), thirteen recipes in the form of decoction are described. Taken together, these twenty-two recipes in the form of decoction are referred to in the summary to be described in the verse no. 13.

Recipes of Kṛta-vedhana in Slimy Form

शाल्मलीमूलचूर्णानां पिच्छाभिर्दशभिस्तथा।

Kṛta-vedhana should be added with the powders of the roots of one of the ten drugs (*picchās*), viz., *śālmalī,* [*sālmalaka, bhadra-parṇī, elā-parṇī, upodikā, uddāla, dhanvana, rājādana, upacitrā* and *gopī*. Powder of these ten recipes becomes slimy when mixed with water]. These ten slimy recipes should be used for emesis. [$^{1}/_{2}$ 8]

The above mentioned ten drugs are elaborated in *Vimāna* 8 : 135.

Recipes of Kṛta-vedhana in the form of Pills

वर्तिक्रियाः षट् फलवत्, फलादीनां घृतं तथा।। ८।।

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On the lines suggested for *madana-phala,* six types of *vartis* (elongated pills) should be prepared. In the same manner, medicated ghee may also be made. [Administration of these pills and the medicated ghee causes emesis.] [$8^1/_2$]

Methods of preparation of pills and medicated ghee are described in *Kalpa* 1 : 18, 21.

Recipes of Kṛta-vedhana in the form of Linctus

कोशातकानि पञ्चाशत् कोविदाररसे पचेत्।
तं कषायं फलादीनां कल्कैर्लेहं पुनः पचेत्।। ९।।
क्ष्वेडस्य तत्र भागः स्याच्छेषाण्यर्धांशिकानि तु।
कषायैः कोविदाराद्यैरेवं तत् कल्पयेत् पृथक्।। १०।।

Fifty fruits of *kṛta-vedhana* should be cooked by adding the juice (or decoction) of *kovidāra.* This should then be added with the paste of *madana-phala, (jīmūtaka, ikṣvāku, dhāmārgava, kuṭaja* or *kṛta-vedhana*), cooked again and made to a linctus. To the decoction, one part of the paste of *kṣveḍa* or *kṛtavedhana* (which should be one fourth of the decoction) and half part of the paste of each of *madana-phala, (jīmūtaka, ikṣvāku, dhāmārgava* and *kuṭaja*) should be added before cooking.

Similarly, these recipes of linctus are to be prepared separately with the decoctions of (1) *kovidāra,* (2) *karbudāra,* (3) *nīpa,* (4) *vidula,* (5) *bimbī,* (6) *śaṇa-puṣpī,* (7) *sadā-puṣpī,* or (8) *pratyak-puṣpī.* [9 - 10]

Along with eight different decoctions of the drugs described above eight types of linctus are to be prepared.

Recipes of Kṛta-vedhana in the form of Meat-soup

कषायेषु फलादीनामानूपं पिशितं पृथक्।
कोशातक्या समं पक्त्वा रसं सलवणं पिबेत्।। ११।।
फलादिपिप्पलीतुल्यं तद्वत् क्ष्वेडरसं पिबेत्।

To the decoctions of (1) *madana-phala,* (2) *jīmūtaka,* (3) *ikṣvāku,* (4) *dhāmārgava,* (5) *kuṭaja,* or (6) *kṛta-vedhana* [the

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powder of] *kośātakī* or *kṛta-vedhana* and equal quantity of the meat of aquatic animals should be added and cooked. This meat-soup should be administered with salt [as emetic].

Similarly, with the decoction of *kośātakī* or *kṛta-vedhana*, meat of aquatic animals and equal quantity of [the powder of] *madana-phala, jīmūtaka, ikṣvāku, dhāmārgava, kuṭaja* and *kṛta-vedhana* [all taken together] should be cooked. This meat-soup may also be administered for emesis. [11-$^1/_2$12]

In the above text seven recipes of meat-soup are described.

Recipe of Kṛta-vedhana Prepared by Boiling with Sugar-cane Juice

क्ष्वेडं कासी पिबेत् सिद्धं मिश्रमिक्षुरसेन च।। १२।।

The powder of *kṛta-vedhana* should be boiled by adding sugar-cane juice and administered [for emesis] to the patient suffering from *kāsa* (coughing). [12$^1/_2$]

Preparation of this recipe by cooking is specified by Jatūkarṇa.

Contents of the Chapter

तत्र श्लोकौ–

क्षीरे द्वौ द्वौ सुरा चैका क्वाथा द्वाविंशतिस्तथा।
दश पिच्छा घृतं चैकं षट् च वर्तिक्रियाः शुभाः।। १३।।
लेहेऽष्टौ सप्त मांसे च योग इक्षुरसेऽपरः।
कृतवेधनकल्पेऽस्मिन् षष्टिर्योगाः प्रकीर्तिताः।। १४।।

To sum up :

In this chapter describing the Pharmaceutics of *Kṛta-vedhana*, sixty recipes of this drug are described, as follows:

(1) Four preparations with milk;
(vide verse no. 5)

(2) One preparation with alcohol;
(vide verse no. 5)

(3) Twenty-two preparations in the form of decoction;
(vide verse nos. 5-7)

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(4) Ten preparations in the form of *picchā* (slimy form);
(vide vese no. 8)

(5) One preparation in the form of medicated ghee,
(vide verse no. 8)

(6) Six preparations in the form of *varti* (pills);
(vide verse no. 8)

(7) Eight preparations in the form of linctus;
(vide verse nos. 9-10)

(8) Seven preparations of meat-soup; and
(vide verse nos. 11-12)

(9) One preparation with the juice of sugar-cane.
(vide verse no. 12) [13-14]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते
दृढबलसंपूरिते कल्पस्थाने कृतवेधनकल्पो
नाम षष्ठोऽध्यायः।। ६।।

Thus, ends the sixth chapter dealing with the "Pharmaceutics of *Kṛta-vedhana*" in the *Kalpa*-section of Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - VII

सप्तमोऽध्यायः

(PHARMACEUTICS OF ŚYĀMĀ-TRIVṚT)

Prologue

अथातः श्यामात्रिवृत्कल्पं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

Now we shall expound the chapter dealing with the "Pharmaceutics of *Śyāmā-trivṛt*".

Thus, said Lord Ātreya. [1-2]

In the previous six chapters of this section (*Kalpa-sthāna*), recipes of different drugs for the purpose of emesis are described. In the remaining six chapters, recipes of different drugs for the purpose of purgation are to be described. Among the purgatives, *trivṛt* is the most innocuous. Therefore, in the present chapter, recipes of this drug are being described on priority basis.

Trivṛt, depending upon the colour of its root is of two types, viz., *śyāmā-trivṛt* (black) and *aruṇa-trivṛt* (pink). According to the verse no. 7, the *aruṇa-trivṛt* is better than the former. But the *śyāmā-trivṛt* has the property to eliminate the morbid material from the body (by purgation) quicker because of which in the title of this chapter the epithet '*śyāmā*' is prefixed to *trivṛt*.

Recipes of this drug (*trivṛt*) to be described later can be prepared with either of these or with both these varieties depending upon the nature of the aggravated *doṣas*, strength of the physique of the patient and such other factors.

Importance of Trivṛt as Purgative

विरेचने त्रिवृन्मूलं श्रेष्ठमाहुर्मनीषिणः।
तस्याः संज्ञा गुणाः कर्म भेदः कल्पश्च वक्ष्यते।।३।।

According to wise physicians, the root of *trivṛt* is the best among the purgatives. Its synonyms, attributes, actions, varieties and recipes will be described [hereafter]. [3]

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The root of *trivrt* as described above is the best among the purgatives. This refers to both the varieties, i.e. the one having *aruṇa* (pink) and the other having *śyāma* (black) root.

Synonyms

त्रिभण्डी त्रिवृता चैव श्यामा कूटरणा तथा।
सर्वानुभूतिः सुवहा शब्दैः पर्यायवाचकैः।। ४।।

Tribhaṇḍī, trivṛtā, śyāmā, kūṭaraṇā, sarvānubhūti and *suvahā* — these are the synonyms of this drug '*trivṛt*'. [4]

Attributes

कषाया मधुरा रूक्षा विपाके कटुका च सा।
कफपित्तप्रशमनी रौक्ष्याच्चानिलकोपनी।। ५।।
सेदानीमौषधैर्युक्ता वातपित्तकफापहैः।
कल्पवैशेष्यमासाद्य सर्वरोगहरा भवेत्।। ६।।

Trivṛt is astringent and sweet in taste, ununctuous and pungent in *vipāka*. It alleviates *Kapha* and *Pitta*. Because of its ununctuousness it aggravates *vāyu*. However, when drugs for the alleviation of *vāyu, pitta* and *kapha* are added to it in a recipe, it becomes capable of curing all types of diseases (caused by *vāyu, pitta* and *kapha*). [5-6]

It has the natural property to aggravate *vāyu*. But when compounded with *vāyu*-alleviating drugs in a recipe, it becomes capable of curing diseases caused by *vāyu* as well. It has the natural property to alleviate *pitta* and *kapha*. But when added with *pitta* and *kapha*-alleviating drugs in a recipe, it becomes all the more useful in curing diseases caused by *pitta* and *kapha* respectively. Because of combination with different drugs and because of preparations according to different pharmaceutical processes, it cures all diseases whether caused by *vāyu, pitta* or *kapha* individually or jointly.

Varieties

मूलं तु द्विविधं तस्याः श्यामं चारुणमेव च।
तयोर्मुख्यतरं विद्धि मूलं यदरुणप्रभम्।। ७।।

Its roots are of two types—one having black (*śyāma*) and the other having pink (*aruṇa*) colour. *Trivṛt* having pink coloured root is more useful. [7]

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When administered for the purpose of purgation, the variety of *trivṛt* having pink root is more useful because of its innocuous nature.

Utility of Pink Variety

सुकुमारे शिशौ वृद्धे मृदुकोष्ठे च तच्छुभम्।

It is useful as a purgative for persons having tender health, for children, for old people and for persons having laxed bowel (*mṛdu-koṣṭha*). [$^{1}/_{2}$ 8]

In general, persons having tender health and children are not supposed to be given purgative therapy. Even then at times, in special circumstances, purgatives are to be given to such patients. For them, *trivṛt* having pink root is very useful.

Utility of Black Variety

मोहयेदाशुकारित्वाच्छ्यामा क्षिण्वीत मूर्च्छयेत्।। ८।।
तैक्ष्ण्यात् कर्षति हृत्कण्ठमाशु दोषं हरत्यपि।
शस्यते बहुदोषाणां क्रूरकोष्ठाश्च ये नराः।। ९।।

The variety of *trivṛt* having black root, because of its instantaneous action, causes unconsciousness, loss (of tissue elements) and fainting. Because of its sharp (*tīkṣṇa*) action, it causes spasm in the cardiac region and throat. It eliminates the morbid material from the body instantaneously. [Therefore], it is useful for persons having excessively aggravated *doṣas* and costive bowel (*krūra-koṣṭha*). [$8^{1}/_{2}$ - 9]

Method of Collection

गुणवत्यां तयोर्भूमौ जातं मूलं समुद्धरेत्।
उपोष्य प्रयतः शुक्ले शुक्लवासाः समाहितः।। १०।।
गम्भीरानुगतं श्लक्ष्णमतिर्यग्विसृतं च यत्।
तद्विपाट्योद्धरेद्गर्भं त्वचं शुष्कां निधापयेत्।। ११।।

The root of *trivṛt* growing in good soil should be culled (uprooted) from the earth carefully in the bright half of the lunar month by a person who has observed fast, who is wearing white apparel and who has concentration of mind. The roots which have penetrated deep into the earth, which

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are smooth and which are not spreading side-ways should be collected. By splitting these roots, the pith should be removed and the bark of the root should be collected. After drying, this root-bark is to be appropriately stored. [10-11]

The method of collecting emetic and purgative drugs is already described in *Kalpa* 1 : 10. The same method has to be followed in the present case also. In addition, some other points are also to be taken care of while collecting the roots of *trivṛt*. For example, it is the root of *trivṛt* which has penetrated deep into the earth that is to be collected. This point is not mentioned in *Kalpa* 1 : 10. Therefore, a brief description of the method of collection is repeated in the above text.

For the storage of the root-bark of *trivṛt*, the method already described in *Kalpa* 1 : 11 should be followed.

Preparatory Measures

स्निग्धस्विन्नो विरेच्यस्तु पेयामात्रोषितः सुखम्।

The person who has undergone oleation and fomentation therapies earlier should be given *peyā* (thin gruel) as food in the previous night so that he purges with ease [by the administration of purgative, in the next morning). [$^1/_2$ 12]

It is already stated in *Sūtra* 13 : 80 that purgative therapy should be given to a person after giving him liquid diet along with meat-soup which is unctuous and hot continuously for three days. The present case is an exception to that rule inasmuch as when purgation therapy is to be given with the help of *trivṛt*, the patient should be given *peyā* (thin gruel) during the previous night before the administration of the therapy. The *peyā* mentioned above should, however, be prepared with meat-soup and added with ghee and hot ingredients.

Recipes of Trivṛt to be Taken along with Sour Liquid, etc.

अक्षमात्रं तयोः पिण्डं विनीयाम्लेन ना पिबेत्।। १२।।
गोऽव्यजामहिषीमूत्रसौवीरकतुषोदकैः ।
प्रसन्नया त्रिफलया शृतया च पृथक् पिबेत्।। १३।।

One *akṣa* (12 Gms.) of the *piṇḍa* (paste in a round bolus form) of either of the two varieties of *trivṛt* should be mixed with sour drinks (*kāñjika*), and taken by a person [for purgation].

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Similarly, the urine of cow, sheep, goat or buffalo, *sauvīraka* (vinegar), *tuṣodaka* (a sour drink prepared of pulses), *prasannā* (a type of wine) or the decoction of *triphalā* should be separately used to take this paste of *trivṛt* [for purgation]. [$12^1/_2$ - 13]

With nine different vehicles, nine different recipes of the root of *trivṛt* are described in the above text. As has been described before, both the varieties of *trivṛt*, viz., the one having black root and the other having pink root can be used either separately or together.

Recipes of Trivṛt in Powder Form

एकैकं सैन्धवादीनां द्वादशानां सनागरम्।
त्रिवृद्द्विद्व्गुणसंयुक्तं चूर्णमुष्णाम्बुना पिबेत्।। १४।।

Two parts of the powder of the root of *trivṛt* should be mixed with the powder of one part of either of the twelve drugs (types of salt), viz., (1) *saindhava,* [(2) *sauvarcala,* (3) *kāla,* (4) *viḍa,* (5) *pākya*, (6) *anūpa*, (7) *kūpya*, (8) *vālukāja*, (9) *maulaka,* (10) *sāmudra*, (11) *romaka* or (12) *audbhida*]. These recipes should be taken along with the powder of *nāgara* [for purgation]. [14]

Along with twelve different drugs, the powder of the root of *trivṛt* should be used, and each one of them should be taken along with the powder of ginger. Thus, twelve recipes of *trivṛt* are described in the above text.

Recipes of Trivṛt to be Taken Along with Cow's Urine

पिप्पली पिप्पलीमूलं मरिचं गजपिप्पली।
सरलः किलिमं हिङ्गु भार्गी तेजोवती तथा।। १५।।
मुस्तं हैमवती पथ्या चित्रको रजनी वचा।
स्वर्णक्षीर्यजमोदा च शृङ्गवेरं च तैः पृथक्।। १६।।
एकैकार्धांशसंयुक्तं पिबेद्गोमूत्रसंयुतम्।

One part of the powder of the root of *trivṛt* should be added with half part of the powder of either (1) *pippalī,* (2) *pippalī-mūla,* (3) *marica,* (4) *gaja-pippalī,* (5) *sarala,* (6) *kilima,* (7) *hiṅgu,* (8) *bhārgī,* (9) *tejovatī,* (10) *musta,* (11)

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haimavatī, (12) *pathyā,* (13) *citraka,* (14) *rajanī* (*haridrā*), (15) *vacā,* (16) *svarṇa-kṣīrī,* (17) *ajamodā,* or (18) *śṛṅgavera.* Each one of these should be taken along with cow's urine for purgation. [15 - $^{1}/_{2}$ 17]

Eighteen recipes of *trivṛt* along with eighteen different types of drugs are described in the above text.

Recipe of Trivṛt Added with Madhuka

मधुकार्धांशसंयुक्तं शर्कराम्बुयुतं पिबेत्।। १७।।

One part of the powder of *trivṛt* should be added with half part of the powder of *madhuka.* This potion should be taken with sugar-water for purgation. [17 $^{1}/_{2}$]

In the verse no. 77 describing the contents of the chapter, two recipes of *madhuka* are mentioned. One of these is described in the above text.

Recipes of Trivṛt Prepared along with Jīvaka, etc.

जीवकर्षभकौ मेदां श्रावणीं कर्कटाह्वयाम्।
मुद्गमाषाख्यपर्ण्यौ च महतीं श्रावणीं तथा।। १८।।
काकोलीं क्षीरकाकोलीमिन्द्रां छिन्नरुहां तथा।
क्षीरशुक्लां पयस्यां च यष्टचाह्वं विधिना पिबेत्।। १९।।
वातपित्तहितान्येतान्यन्यानि तु कफानिले।

[The powder of *trivṛt* should be taken along with the powder of either] (1) *jīvaka,* (2) *ṛṣabhaka,* (3) *medā,* (4) *śrāvaṇī* or *muṇḍī,* (5) *karkaṭa-śṛṅgī,* (6) *mudga-parṇī,* (7) *māṣa-parṇī,* (8) *mahā-śrāvaṇī,* (9) *kākolī,* (10) *kṣīra-kākolī,* (11) *indrā* or *kokilākṣa;* (12) *chinna-ruhā,* (13) *kṣīra-śuklā* or *kṣīra-vidārī,* or (14) *payasyā* or *arka-puṣpī* [for purgation].

Similarly, the powder of *trivṛt* should be taken along with the powder of *yaṣṭyāhva* (*madhuka*) [for purgation].

The above mentioned recipes are useful for diseases caused by *vāyu* or *pitta.* Other recipes which are useful for the diseases caused by *kapha* and *vāyu* [will be described later]. [18 - $^{1}/_{2}$ 20]

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In the above text, fourteen recipes of *trivṛt* added with fourteen different drugs like *jīvaka* are described. In addition one recipe along with *yaṣṭī* (*madhuka*) is also described here. The present one along with the one described earlier in the verse no. 17 constitutes the two recipes of *madhuka* which are mentioned in the verse no. 77 summarising the contents of this chapter.

Recipes of Trivṛt to be Taken Along with Milk, etc.

क्षीरमांसेक्षुकाश्मर्यद्राक्षापीलुरसैः पृथक्।। २०।।
सर्पिषा वा तयोश्चूर्णमभयार्धांशिकं पिबेत्।

One part of the powder of *trivṛt* and half part of the powder of *harītakī* may be taken along with either (1) milk, (2) meat-soup, (3) juice of sugar-cane, (4) decoction of *kāśmarya*, (5) grape-juice, (6) juice of *pīlu*, or (7) ghee [for purgation]. [$20^{1}/_{2}$ - $^{1}/_{2}21$]

In the above text, seven different recipes of *trivṛt* to be taken along with seven different ingredients are described.

Recipe of Trivṛt in the form of Linctus (No. 1)

लिह्याद्वा मधुसर्पिर्भ्यां संयुक्तं ससितोपलम्।। २१।।

[The powder of *trivṛt* should be] added with honey and ghee, [and made to a linctus]. Intake of this linctus along with *sitopala* (sugar with large crystals) [causes purgation]. [$21^{1}/_{2}$]

Recipe of Trivṛt in the form of Linctus (No. 2)

अजगन्धा तुगाक्षीरी विदारी शर्करा त्रिवृत्।
चूर्णितं क्षौद्रसर्पिर्भ्यां लीढ्वा साधु विरिच्यते।। २२।।
सन्निपातज्वरस्तम्भदाहतृष्णार्दितो नरः।

The powder of *ajagandhā* (*ajamodā*), *tugākṣīrī*, *vidārī*, sugar and *trivṛt* should be added with honey as well as ghee. Intake of this linctus is useful as a mild purgative for the patient suffering from *sānnipātika jvara* (fever caused by the aggravation of all the three *doṣas*), *stambha* (stiffness of the body), *dāha* (burning syndrome) and *tṛṣṇā* (morbid thirst). [22 - $^{1}/_{2}$ 23]

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Recipe of Trivṛt in the form of Linctus (No. 3)

श्यामात्रिवृत्कषायेण कल्केन च सशर्करम्।। २३।।
साधयेद्विधिवल्लेहं लिह्यात् पाणितलं ततः।

With the decoction and paste of the black variety of *trivṛt*-root, a linctus should be prepared according to the prescribed procedure by adding sugar. One *pāṇitala* (12 Gms. approx.) of this linctus should be taken [for purgation].

[$23^{1}/_{2}$ - $^{1}/_{2}$ 24]

In this recipe, one part of the powder of *trivṛt*, one part of sugar and one-fourth part of the decoction of *trivṛt* should be used.

Recipe of Trivṛt in the form of Linctus (No. 4)

सक्षौद्रां शर्करां पक्त्वा कुर्यान्मृद्भाजने नवे।। २४।।
क्षिपेच्छीते त्रिवृच्चूर्णे त्वक्पत्रमरिचैः सह।
मात्रया लेहयेदेतदीश्वराणां विरेचनम्।। २५।।

Sugar should be boiled with honey in a new earthen pot. After it is cooked and cooled, the powder of *trivṛt* along with *tvak* (cinnamon bark), *patra* (cinnamon leaves) and *marica* should be added. This linctus should be taken in appropriate dose which is useful as purgative for persons belonging to aristocratic class. [$24\ ^{1}/_{2}$ - 25]

Normally honey is not cooked. But the present recipe is an exception to this rule. It is the characteristic feature of this recipe in which honey is cooked and added with other ingredients. In this recipe, one part of the powder of *trivṛt* should be added with the one-fourth part of the powder of *tvak*, etc., taken together. The purpose of adding *tvak*, etc., in this recipe is only to provide aroma.

This recipe is administered to persons of aristocratic class. The physique of these persons is generally tender and unctuous. Oleation therapy is therefore, not essential for such persons, and this recipe alone is enough to cause appropriate purgation.

Recipe of Trivṛt in the form of Linctus (No. 5)

कुडवांशान् रसानिक्षुद्राक्षापीलुपरूषकात्।
सितोपलापलं क्षौद्रात् कुडवार्धं च साधयेत्।। २६।।

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तं लेहं योजयेच्छीतं त्रिवृच्चूर्णेन शास्त्रवित्।
एतदुत्सन्नपित्तानामीश्वराणां विरेचनम्।। २७।।

One *kuḍava* (192 ml. approx.) of the juice of each of sugar-cane, grape, *pīlu* and *parūṣaka,* one *pala* (48 Gms. approx.) of *sitopalā* (sugar having big crystals) and half *kuḍava* of honey should be cooked. After it is cooled, the powder of *trivṛt* should be added by the physician well versed in scriptures. This is a good purgative for aristocratic persons having excessively aggravated *pitta.* [26-27]

Even though the quantity of *trivṛt* is not specified, it should be understood as one-fourth in quantity of the remaining items of the above mentioned linctus.

Recipes Prepared with Sugar

शर्करामोदकान् वर्तीर्गुलिकामांसपूपकान्।
अनेन विधिना कुर्यात् पैत्तिकानां विरेचनम्।। २८।।

Following the above mentioned procedure [recipes of *trivṛt*] should be prepared in the form of *śarkarā-modaka* (sweet-meat prepared of sugar), *śarkarā-vartī* (rolls made of sugar), *śarkarā-gulikā* (pills made of sugar) and *śarkarā-māṃsa-pūpaka* (pan-cake of sugar prepared with meat). These recipes are to be used as purgatives by people suffering from diseases caused by *pitta.* [28]

These recipes are prepared according to the process similar to linctus. Therefore, these are described here. For preparing these recipes, sugar-cane juice, etc., and the powder of *trivṛt* are to be used as described in the verse nos. 26-27.

Recipe of Trivṛt in the form of Linctus (No. 6)

पिप्पलीं नागरं क्षारं श्यामां त्रिवृतया सह।
लेहयेन्मधुना सार्धं श्लेष्मलानां विरेचनम्।। २९।।

[The powder of] *trivṛt* (the variety having pink root) should be added with the powders of *pippalī, nāgara, kṣāra* (alkali preparation) and *śyāmā-trivṛt* (the variety having black root). To this, honey should be added, and it should be

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given in the form of a linctus for purgation to patients suffering from diseases caused by *kapha*. [29]

Recipe of Trivṛt in the form of Linctus (No. 7)

मातुलुङ्गाभयाधात्रीश्रीपर्णीकोलदाडिमात् ।
सुभृष्टान् स्वरसांस्तैले साधयेत्तत्र चावपेत्।। ३०।।
सहकारात् कपित्थाच्च मध्यमम्लं च यत् फलम्।
पूर्ववद्बहलीभूते त्रिवृच्चूर्णे समावपेत्।। ३१।।
त्वक्पत्रकेशरैलानां चूर्णं मधु च मात्रया।
लेहोऽयं कफपूर्णानामीश्वराणां विरेचनम्।। ३२।।

The juice of *mātuluṅga, abhayā, dhātrī, śrī-parṇī, kola* and *dāḍima* should be well sizzled and cooked in oil by adding the pulp of *sahakāra* (mango), *kapittha* and sour fruit (*mātuluṅga*). When it becomes thick, the powder of the root of *trivṛt* along with the powders of *tvak, patra, keśara* and *elā* should be added. To this, honey should be added and made to a linctus. Intake of this linctus in appropriate dose is useful as purgative for aristocratic persons having aggravated *kapha*. [30 - 32]

The recipe should be prepared on the line suggested in the verse nos. 26-27. By implication, juice of *mātuluṅga,* etc. should be taken in the quantity of one *kuḍava* each.

Recipes of Trivṛt in the form of Pānaka (Syrup), etc.

पानकानि रसान् यूषान्मोदकान् रागषाडवान्।
अनेन विधिना कुर्याद्विरेकार्थं कफाधिके।। ३३।।

Following the above mentioned procedure, the recipes [of *trivṛt*] should be prepared in the forms of (1) *pānaka* (syrup), (2) *rasa* (meat-soup), (3) *yūṣa* (vegetable soup), (4) *modaka* (sweet-meat), and (5) *rāga-ṣāḍava* (sour drinks having pungent taste). These recipes are to be administered for purgation to a person having aggravated *kapha*. [33]

Because of the similarity in nature of preparations, five recipes in the form of *pānaka*, etc., are described in the above text.

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Recipes of Trivṛt in the form of Tarpaṇa (Demulcent Drink)

भृङ्गैलाभ्यां समा नीली तैस्त्रिवृत्तैश्च शर्करा।
चूर्णं फलरसक्षौद्रशक्तुभिस्तर्पणं पिबेत्।। ३४।।
वातपित्तकफोत्थेषु रोगेष्वल्पानलेषु च।
नरेषु सुकुमारेषु निरपायं विरेचनम्।। ३५।।

A *tarpaṇa* (demulcent drink) should be prepared from the powder of one part of *bhṛṅga* (*guḍa-tvak*), one part of *elā*, two parts of *nīlī*, three parts of *trivṛt* and seven parts of sugar by adding the juice of *dāḍima*, honey and roasted corn-flour. This is an innocuous purgative for patients suffering from diseases caused by *vāyu*, *pitta* and *kapha*, for persons who have less of digestive power, and also for persons who have delicate constitution. [34-35]

This is the first recipe of *tarpaṇa* (demulcent drink). The second recipe of demulcent drink will be described in the verse no. 65-66.

Recipe of Trivṛt in the form of Modaka

शर्करात्रिफलाश्यामात्रिवृत्पिप्पलिमाक्षिकैः।
मोदकः सन्निपातोर्ध्वरक्तपित्तज्वरापहः।। ३६।।

A *modaka* (sweet-meat of large size) should be prepared of sugar, *harītakī*, *vibhītaka*, *āmalakī*, black variety of *trivṛt*, *pippalī* and honey. Intake of this [purgative recipe] cures *sannipāta* (diseases caused by the simultaneous aggravation of all the three *doṣas*), *ūrdhvaga-rakta-pitta* (a disease characterized by bleeding from the upper openings of the body) and fever. [36]

This is the first recipe of *modaka*. Other four recipes of *modaka* will be described in the verse no. 40-45.

For the preparation of *modaka*, sugar should be added in double the quantity of the other ingredients. By implication, in the above recipe, one part each of *harītakī*, *vibhītaka*, *āmalakī*, *trivṛt* having black root and *pippalī* should be added with ten parts of sugar.

Recipe of Trivṛt in the form of Linctus (No. 8)

त्रिवृच्छाणा मतास्तिस्त्रस्तिस्त्रश्च त्रिफलात्वचः।

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विडङ्गपिप्पलीक्षारशाणास्तिस्त्रश्च चूर्णिताः।। ३७।।
लिह्यात् सर्पिर्मधुभ्यां च मोदकं वा गुडेन तु।
भक्षयेन्निष्परीहारमेतच्छोधनमुत्तमम् ।। ३८।।
गुल्मं प्लीहोदरं श्वासं हलीमकमरोचकम्।
कफवातकृतांश्चान्यान् व्याधीनेतद्व्यपोहति।। ३९।।

Three *śāṇas* of the powder of *trivṛt* should be added with one *śāṇa* of the powders each of *harītakī*-pulp, *vibhītaka*-pulp, *āmalakī*-pulp, *viḍaṅga*, *pippalī* and *kṣāra* (alkali preparation). This powder should be added with ghee and honey, and made to a linctus or (made to) a *modaka* (sweet-meat) with jaggery. This is an excellent purgative, and it does not require any dietetic prohibitions. Intake of this, cures *gulma* (phantom tumour), *plīhodara* (splenomegaly), *śvāsa* (asthma), *halīmaka* (chronic jaundice), *arocaka* (anorexia) and such other diseases caused by the aggravation of *kapha* and *vāyu*. [37 - 39]

This is the eighth recipe of linctus notwithstanding the statement that this recipe may also be prepared in the form of *modaka* (lit. sweet-meat in the form of a bolus) with *guḍa* (jaggery).

Kalyāṇaka Guḍa - Recipe of Trivṛt in the form of Modaka (No. 2)

विडङ्गपिप्पलीमूलत्रिफलाधान्यचित्रकान् ।
मरिचेन्द्रयवाजाजीपिप्पलीहस्तिपिप्पलीः ।। ४०।।
लवणान्यजमोदां च चूर्णितं कार्षिकं पृथक्।
तिलतैलत्रिवृच्चूर्णभागौ चाष्टपलोन्मितौ।। ४१।।
धात्रीफलरसप्रस्थांस्त्रीन् गुडार्धतुलां तथा।
पक्त्वा मृद्वग्निना खादेद्बदरोदुम्बरोपमान्।। ४२।।
गुडान् कृत्वा न चात्र स्याद्विहाराहारयन्त्रणा।
मन्दाग्नित्वं ज्वरं मूर्च्छां मूत्रकृच्छ्रमरोचकम्।। ४३।।
अस्वप्नं गात्रशूलं च कासं श्वासं भ्रमं क्षयम्।
कुष्ठार्शःकामलामेहगुल्मोदरभगन्दरान् ।। ४४।।
ग्रहणीपाण्डुरोगांश्च हन्युः पुंसवनाश्च ते।
कल्याणका इति ख्याताः सर्वेष्वृतुषु यौगिकाः।। ४५।।
इति कल्याणकगुडः।।

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One *karṣa* (12 Gm. approx.) each of *viḍaṅga, pippalī-mūla, harītakī, vibhītaka, āmalakī, dhānyaka, citraka, marica, indra-yava, ajājī, pippalī, hasti-pippalī (gaja-pippalī), saindhava-lavaṇa, samudra-lavaṇa, viḍ-lavaṇa, sauvarcala-lavaṇa, audbhida-lavaṇa* and *ajamodā* should be made to powders separately and mixed together. To this powder, eight *palas* each of sesame oil and powder of *trivṛt* should be added. By adding three *prasthas* of the juice of *āmalakī* and half *tulā* of jaggery, the recipe should be cooked over mild fire. From out of this paste, pills (*guḍa*) of the size of *badara* or *udumbara* should be made out. While taking this recipe there is no restriction of food and regimen. Intake of this (purgative) cures *mandāgni* (suppression of the power of digestion), *jvara* (fever), *mūrcchā* (fainting), *mūtra-kṛcchra* (dysuria), *arocaka* (anorexia), *asvapna* (insomnia), *gātra-śūla* (body ache), *kāsa* (cough), *śvāsa* (asthma), *bhrama* (giddiness), *kṣaya* (consumption), *kuṣṭha* (obstinate skin diseases including leprosy), *arśas* (piles), *kāmalā* (jaundice), *meha* (obstinate urinary disorders including diabetes), *gulma* (phantom tumour), *udara* (obstinate abdominal disorders including ascites), *bhagandara* (anal fistula), *grahaṇī* (sprue syndrome) and *pāṇḍu* (anemia). This recipe also helps in procreating a male progeny (*puṃsavana*).

This recipe is called *Kalyāṇaka* (which bestows auspiciousness). It is useful in all the seasons.

Thus, ends the description of *Kalyāṇaka-guḍa*.[40-45]

This is the second recipe of *trivṛt* in the form of *modaka* (sweet-meat in large bolus form).

Recipe of Trivṛt in the form of Modaka (No. 3)

व्योषत्वक्पत्रमुस्तैलाविडङ्गामलकाभयाः ।
समभागा भिषग्दद्याद्द्विगुणं च मुकूलकम्।। ४६।।
त्रिवृतोऽष्टगुणं भागं शर्करायाश्च षड्गुणम्।
चूर्णितं गुडिकाः कृत्वा क्षौद्रेण पलसंमिताः।। ४७।।

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भक्षयेत् कल्यमुत्थाय शीतं चानु पिबेज्जलम्।
मूत्रकृच्छ्रे ज्वरे वम्यां कासे श्वासे भ्रमे क्षये।। ४८।।
तापे पाण्ड्वामयेऽल्पेऽग्नौ शस्ता निर्यन्त्रणाशिनः।
योगः सर्वविषाणां च मतः श्रेष्ठो विरेचने।। ४९।।
मूत्रजानां च रोगाणां विधिज्ञेनावचारितः।

One part each of *śuṇṭhī, pippalī, marica, tvak, patra, musta, elā, viḍaṅga, āmalakī* and *harītakī,* two parts of *mukūlaka* (*dantī*), eight parts of *trivṛt* and six parts of sugar should be made to powder. To this, honey should be added and large size pill(s) or *guḍikā* measuring one *pala* each should be prepared. One such pill should be taken in the morning after rising from the bed. Thereafter, cold water should be taken. It is an excellent recipe for purgation, and it should be administered by an expert (physician). It is useful in *mūtra-kṛcchra* (dysuria), *jvara* (fever), *vamī* (vomiting), *kāsa* (cough), *śvāsa* (asthma), *bhrama* (giddiness), *kṣaya* (consumption), *tāpa* (burning syndrome), *pāṇḍu* (anemia) and *agni-māndya* (suppression of the power of digestion). It is useful for all types of poisoning and all types of urinary diseases. While taking this recipe, no dietetic restriction is necessary. [46 - $^{1}/_{2}$ 50]

This is the third recipe of *modaka.* In other texts, this recipe is known as *Abhayādya-modaka.* The quantity of honey to be added in this recipe is not specified. It should be used in such quantity which will help in the preparation of *modaka.*

There is a difference of opinion about the quantity of ingredients to be added in this recipe. According to some physicians, *śuṇṭhī,* etc., should be one part in total, and to this two parts of *dantī* should be added.

Recipe of Trivṛt in the form of Modaka (No. 4)

पथ्याधात्र्युरुबूकाणां प्रसृतौ द्वौ त्रिवृत्पलम्।। ५०।।
दश तान्मोदकान् कुर्यादीश्वराणां विरेचनम्।

One *pala* (48 Gms. approx.) of the powders of *trivṛt* should be added with two *prasṛtas* of the powder of *pathyā, dhātrī* and *urubūka* (castor seed). [This should be added with

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honey in adequate quantity.] From out of this paste, ten large size pills should be prepared. Intake of this pill helps in the purgation of aristocratic persons. [$50^{1}/_{2}$ - $^{1}/_{2}51$]

In the above text, the fourth recipe of *trivṛt* in the form of *modaka* is described.

Recipe of Trivṛt in the form of Modaka (No. 5)

त्रिवृद्धैमवती श्यामा नीलिनी हस्तिपिप्पली।। ५१।।
समूला पिप्पली मुस्तमजमोदा दुरालभा।
कार्षिकं नागरपलं गुडस्य पलविंशतिम्।। ५२।।
चूर्णितं मोदकान् कुर्यादुदुम्बरफलोपमान्।
हिङ्गुसौवर्चलव्योषयवानीबिडजीरकैः ।। ५३।।
वचाजगन्धात्रिफलाचव्यचित्रकधान्यकैः ।
मोदकान् वेष्टयेच्चूर्णैस्तान् सतुम्बुरुदाडिमैः।। ५४।।
त्रिकवङ्क्षणहृद्बस्तिकोष्ठार्शःप्लीहशूलिनाम्।
हिक्काकासारुचिश्वासकफोदावर्तिनां शुभाः।। ५५।।

One *karṣa* of the powder each of *trivṛt* (the variety having pink root), *haimavatī, śyāmā* (the variety of *trivṛt* having black root), *nīlinī, hasti-pippalī, pippalī-mūla, pippalī, musta, ajamodā* and *durālabhā,* one *pala* of the powder of *nāgara* and twenty *palas* of *guḍa* (jaggery) should be mixed together. From out of this paste, *modakas* (large size pills) of the size of *udumbara* should be prepared. These *modakas* should be sprinkled (smeared) with the powder of *hiṅgu, sauvarcala, śuṇṭhī, pippalī, marica, yavānī, biḍa, jīraka, vacā, aja-gandhā, harītakī, vibhītaka, āmalakī, cavya, citraka, dhānyaka, tumburu* and *dāḍima*. These *modakas* are very useful for patients suffering from pain in *trika* (lumbo-sacral region) *vaṅkṣaṇa* (pelvic region), *hṛt* (cardiac region), *basti* (region of urinary bladder) *koṣṭha* (colon), *arśas* (piles), *plīhan* (splenic disorder), *hikkā* (hiccup), *kāsa* (cough), *aruci* (anorexia), *śvāsa* (asthma) and *kaphaja udāvarta* (upward movement of wind in the abdomen caused by aggravated *kapha*).

[$51^{1}/_{2}$ - 55]

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In the above text, the fifth recipe of *trivṛt* in the form of *modaka* is described.

Recipe of Trivṛt Useful in Rainy season

त्रिवृतां कौटजं बीजं पिप्पलीं विश्वभेषजम्।
क्षौद्रद्राक्षारसोपेतं वर्षास्वेतद्विरेचनम्।। ५६।।

[The powder of] *trivṛt*, seeds of *kuṭaja, pippalī* and *viśva-bheṣaja* (*śuṇṭhī*) should be mixed with honey and grape-juice. This purgative recipe is useful in rainy season. [56]

Recipe of Trivṛt Useful in Autumn

त्रिवृद्दुरालभामुस्तशर्करोदीच्यचन्दनम् ।
द्राक्षाम्बुना सयष्टचाह्वसातलं जलदात्यये।। ५७।।

[The powder of] *trivṛt, durālabhā, musta,* sugar, *udīcya, candana, yaṣṭi-madhu* and *sātalā* (*carma-kaśā*) should be taken along with grape-juice. It is useful in autumn. [57]

Recipe of Trivṛt for Winter

त्रिवृतां चित्रकं पाठामजाजीं सरलं वचाम्।
स्वर्णक्षीरीं च हेमन्ते पिष्ट्वा तूष्णाम्बुना पिबेत्।। ५८।।

The paste of *trivṛt, citraka, pāṭhā, ajājī, sarala, vacā* and *svarṇa-kṣīrī* should be taken along with hot water. This recipe is useful for purgation in winter season. [58]

In the winter season when there is strong current of cold wind, purgation therapy is prohibited. But in the case of some specific diseases purgation therapy is essential. Therefore, the recipe for purgation even for winter is described in the above text.

Recipe of Trivṛt for Summer Season

शर्करा त्रिवृता तुल्या ग्रीष्मकाले विरेचनम्।

The recipe containing sugar and equal quantity of *trivṛt* is useful for purgation during the summer season. [$^1/_2$ 59]

Recipe of Trivṛt for All Seasons (No. 1)

त्रिवृन्नायन्तिहपुषाः सातलां कटुरोहिणीम्।। ५९।।
स्वर्णक्षीरीं च संचूर्ण्य गोमूत्रे भावयेत्त्र्यहम्।

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एष सर्वर्तुको योगः स्निग्धानां मलदोषहृत्।। ६०।।

Trivṛt, trāyanti, hapuṣā, sātalā, kaṭu-rohiṇī and *svarṇa-kṣīrī* should be made to powder, and impregnated with cow's urine for three days. This recipe for purgation is useful in all the seasons. It helps in eliminating morbid matter from the body of persons with unctuousness. [$59^1/_2$ - 60]

This recipe is useful for all the seasons including those not described above, namely spring, etc.

Recipe of Trivṛt for All Seasons (No. 2)

त्रिवृच्छ्यामा दुरालम्भा वत्सकं हस्तिपिप्पली।
नीलिनी त्रिफला मुस्तं कटुका च सुचूर्णितम्।। ६१।।
सर्पिर्मांसरसोष्णाम्बुयुक्तं पाणितलं ततः।
पिबेत् सुखतमं ह्येतद्रूक्षाणामपि शस्यते।। ६२।।

Trivṛt (having pink root), *śyāmā* (the variety of *trivṛt* having black root), *durālambhā, vatsaka, hasti-pippalī, nīlinī, harītakī, vibhītaka, āmalakī, musta* and *kaṭukā* should be made to a fine powder. One *pāṇitala* (12 Gms. approx.) of this recipe should be taken along with ghee, meat-soup and hot water. This is an excellent recipe for purgation, and is useful even for persons who are ununctuous. [61-62]

Recipe of Trivṛt in the form of Powder

त्र्यूषणं त्रिफला हिङ्गु कार्षिकं त्रिवृतापलम्।
सौवर्चलार्धकर्षं च पलार्धं चाम्लवेतसात्।। ६३।।
तच्चूर्णं शर्करातुल्यं मद्येनाम्लेन वा पिबेत्।
गुल्मपार्श्वार्तिनुत्सिद्धं जीर्णे चाद्याद्रसौदनम्।। ६४।।

One *karṣa* (12 Gms. approx.) each of *śuṇṭhī, pippalī, marica, harītakī, bibhītaka, āmalakī* and *hiṅgu,* one *pala* (48 Gms. approx.) of *trivṛt,* half *karṣa* (6 Gms. approx.) of *sauvarcala* and half *pala* (24 Gms. approx.) of *amla-vetasa* should be made to powder. To this, equal quantity of sugar should be added. It should be taken along with either alcohol or the juice of sour fruits. After the recipe is digested, the

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patient should be given rice with meat-soup to eat. It is an effective recipe for purgation to cure *gulma* (phantom tumour) and *pārśvārti* (pain in the sides of the chest). [63-64]

[Cakrapāṇi has described the recipe mentioned above as the second recipe in powder form. The text of the first recipe in powder form is not available. The recipe described in the earlier verse nos. 61-62 could have been taken in this connection. But Cakrapāṇi has specifically mentioned this to be one of the six recipes for different seasons (*sarvartuka-yoga*). If this is treated as one of the two *cūrṇa-yogas*, then there will be shortage of one recipe for seasons.

In the verse no. 79, summarising the contents of the chapter it is written "*dvau curṇe tarpaṇe tathā*". By implication, in powder form and in the form of *tarpaṇa* there are in total two recipes. Thus, the total number of recipes will come to one hundred and ten. Cakrapāṇi's comentory. "..... *cūrṇayogo dvitīyaḥ*" is slightly misleading.]

Recipe of Trivṛt in the form of Tarpaṇa (Demulcent Drink)

त्रिवृतां त्रिफलां दन्तीं सप्तलां व्योषसैन्धवम्।
कृत्वा चूर्णं तु सप्ताहं भाव्यमामलकीरसे।। ६५।।
तद्योज्यं तर्पणे यूषे पिशिते रागयुक्तिषु।

Trivṛt, harītakī, vibhītaka, āmalakī, dantī, saptalā, śuṇṭhī, pippalī, marica and *saindhava* should be made to powder and impregnated with the juice of *āmalakī* for seven days. This powder should be added to *tarpaṇa* (demulcent drink), *yūṣa* (vegetable soup), *piśita* (meat preparations or meat-soup) and *rāga* (preparations having pungent taste). [65 - $^{1}/_{2}$ 66]

This is one of the two recipes of *tarpaṇa* (demulcent drink), the first one is already described in the verse nos. 34-35.

Recipes of Trivṛt in the form of Medicated Ghee and Milk

तुल्याम्लं त्रिघृताकल्कसिद्धं गुल्महरं घृतम्।। ६६।।
श्यामात्रिवृतयोर्मूलं पचेदामलकैः सह।
जले तेन कषायेण पक्त्वा सर्पिः पिबेन्नरः।। ६७।।
श्यामात्रिवृत्कषायेण सिद्धं सर्पिः पिबेत्तथा।
साधितं वा पयस्ताभ्यां सुखं तेन विरिच्यते।। ६८।।

Ghee should be boiled with equal quantity of sour juice

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and the paste of *trivṛt*. This medicated ghee cures *gulma* (phantom tumour).

The root of *śyāmā* (the variety of *trivṛt* having black root) and *trivṛt* (the variety having pink root) should be cooked with water by adding *āmalakī*. With this decoction, ghee should be cooked [and used for purgation].

With the decoction of *śyāmā* (the variety of *trivṛt* having black root) and *trivṛt* (the variety having pink root), ghee should be cooked [and used for purgation].

Milk should be boiled with *śyāmā* (the variety of *trivṛt* having black root) and *trivṛt* (the variety having pink root) may similarly be used as a comfortable (painless) purgative. [$66^{1}/_{2}$ - 68]

In the above text, three recipes of medicated ghee and one recipe of medicated milk are described.

Recipes of Trivṛt in the form of Alcoholic Drink

त्रिवृन्मुष्टींस्तु सनखानष्टौ द्रोणेऽम्भसः पचेत्।
पादशेषं कषायं तं पूतं गुडतुलायुतम्।। ६९।।
स्निग्धे स्थाप्यं घटे क्षौद्रपिप्पलीफलचित्रकैः।
प्रलिप्ते मधुना मासं जातं तन्मात्रया पिबेत्।। ७०।।
ग्रहणीपाण्डुरोगघ्नं गुल्मश्वयथुनाशनम्।
सुरां वा त्रिवृतायोगकिण्वां तत्क्वाथसंयुताम्।। ७१।।

Eight fist-fuls of *trivṛt* should be cooked in one *droṇa* of water till one fourth of the liquid remains. The decoction should then be strained out and added with one *tulā* of jaggery, honey, *pippalī*, *madana-phala* and *citraka*. This should be kept in an unctuous jar the inside wall of which is smeared with honey for one month. When well fermented, it should be taken in appropriate dose which cures *grahaṇī* (sprue syndrome), *pāṇḍu* (anemia), *gulma* (phantom tumour) and *śvayathu* (oedema).

The wine made out of the decoction of *trivṛt* by adding its *kiṇva* (yeast) may also be used for purgation. [69 - 71]

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In the text above, two recipes of *trivṛt* prepared in the form of alcoholic drink are described.

Recipes of Trivṛt in the form of Kāñjī (Sour Drink)

यवैः श्यामात्रिवृत्क्वाथस्विन्नैः कुल्माषमम्भसा।
आसुतं षडहं पल्ले जातं सौवीरकं पिबेत्।। ७२।।
भृष्टान् वा सतुषाञ्छुद्धान् यवांस्तच्चूर्णसंयुतान्।
आसुतानम्भसा तद्वत् पिबेज्जातं तुषोदकम्।। ७३।।

Barley should be steam-boiled with the decoction of *śyāmā* (the variety of *trivṛt* having black root) and *trivṛt* (the variety having pink root). This steam-boiled barley (*kulmāṣa*) should be added with water and made to ferment for six days in a vessel covered with a heap of grains. The *sauvīraka* (sour drink) thus prepared [should be used for purgation].

Alternatively, the unhusked and clean grains of barley should be roasted. To this, the powder of *trivṛt* should be added along with water and made to ferment in the above mentioned manner. When fermented, this *tuṣodaka* (a type of sour drink) should be used for purgation. [72-73]

Recipes of Trivṛt in the form of Badara, etc.

तथा मदनकल्पोक्तान् षाडवादीन् पृथग्दश।
त्रिवृच्चूर्णेन संयोज्य विरेकार्थं प्रयोजयेत्।। ७४।।

As described in *Kalpa* 1 : 26, with the help of the powder of *trivṛt,* ten different recipes in the form of (1) *badara-ṣāḍava* , (2) *rāga,* (3) *leha,* (4) *modaka,* (5) *utkārikā,* (6) *tarpaṇa,* (7) *pānaka,* (8) *māṃsa-rasa,* (9) *yūṣa,* and (10) *madya* should be prepared and used for purgation. [74]

Recapitulation

भवतश्चात्र–

त्वक्केशराम्रातकदाडिमैलासिताेपलामाक्षिकमातुलुङ्गैः ।
मद्यैस्तथाऽम्लैश्च मनोनुकूलैर्युक्तानि देयानि विरेचनानि।। ७५।।
शीताम्बुना पीतवतश्च तस्य सिञ्चेन्मुखं छर्दिविघातहेतोः।
हृद्यांश्च मृत्पुष्पफलप्रवालानम्लं च दद्यादुपजिघ्रणार्थम्।। ७६।।

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Thus, it is said :

Purgative recipes should be administered along with *tvak* (cinnamon), *keśara* (saffron), *āmrātaka, dāḍima* (pomegranate), *elā* (cardamom), *sitopalā* (sugar having big crystals), honey, *mātuluṅga,* wine and sour drinks which are pleasing to the patient.

To prevent the tendency for vomiting, after the intake of purgative recipe, the face of the patient should be sprinkled with cold water, and he should be asked to inhale the smell of the earth, flowers, fruits, tender leaves and sour ingredients, the aroma of which is pleasing to his heart. [75-76]

Purgative therapy, sometimes, causes vomiting sensation. To prevent vomiting, regimens are described in other medicinal texts as well.

Contents of Chapter

तत्र श्लोकाः–

एकोऽम्लादिभिरष्टौ च दश द्वौ सैन्धवादिभिः।
मूत्रेऽष्टादश यष्ट्यां द्वौ जीवकादौ चतुर्दश।। ७७।।
क्षीरादौ सप्त लेहेऽष्टौ चत्वारः सितयाऽपि च।
पानकादिषु पञ्चैव षड्दृतौ पञ्च मोदकाः।। ७८।।
चत्वारश्च घृते क्षीरे द्वौ चूर्णे तर्पणे तथा।
द्वौ मद्ये काञ्जिके द्वौ च दशान्ये षाडवादिषु।। ७९।।
श्यामायास्त्रिवृतायाश्च कल्पेऽस्मिन् समुदाहृतम्।
शतं दशोत्तरं सिद्धं योगानां परमर्षिणा।। ८०।।

To sum up :

In this chapter on the Pharmaceutics of *Śyāmā Trivṛt,* the Great Sage has illustrated one hundred and ten recipes of effective purgatives as follows :

(1) Nine recipes prepared with sour juice, etc.; (vide verse nos. 12-13)

(2) Twelve recipes prepared with rock-salt, etc.; (vide verse no. 14)

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(3) Eighteen recipes with cow's urine;
(vide verse nos. 15-16)

(4) Two recipes prepared by adding *yaṣṭi-madhu*;
(vide verse nos. 17,19)

(5) Fourteen recipes prepared with *jīvaka,* etc.;
(vide verse nos. 18-20)

(6) Seven recipes prepared with milk, etc.;
(vide verse nos. 20-21)

(7) Eight recipes prepared in the form of linctus;
(vide verse nos. 21-27, 29-32, 37-39)

(8) Four recipes prepaed with sugar;
(vide verse no. 28)

(9) Five recipes in the form of syrup, etc.;
(vide verse no. 33)

(10) Six recipes for different seasons;
(vide verse nos. 56-62)

(11) Five recipes prepared in the form of *modaka*;
(vide verse nos 36, 40-55)

(12) Four recipes in the form of medicated ghee or medicated milk;
(vide verse nos. 66-68)

(13) Two recipes (one) in the form of powder (vide verse nos. 34-35) and the other in the form of *tarpaṇa*
(vide verse nos. 63-66);

(14) Two recipes in the form of medicated wine;
(vide verse no. 69-71)

(15) Two recipes in the form of *kāñjī* (fermented sour drink); and
(vide verse nos. 72-73)

(16) Ten recipes in the form of *ṣāḍava*, etc.
(vide verse no. 74) [77-80]

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Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते
दृढबलसंपूरिते कल्पस्थाने श्यामात्रिवृ-
त्कल्पो नाम सप्तमोऽध्यायः ।। ७ ।।

Thus, ends the seventh chapter dealing with the "Pharmaceutics of *Śyāmā-trivṛt*" in the *Kalpa*-section of Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - VIII

अष्टमोऽध्यायः

(PHARMACEUTICS OF CATURAṄGULA)

Prologue

अथातश्चतुरङ्गुलकल्पं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

We shall now expound the chapter dealing with the "Pharmaceutics of *Caturaṅgula*".

Thus, said Lord Ātreya. [1-2]

Like *trivṛt, caturaṅgula* is a mild purgative. Therefore, after the chapter on *trivṛt*, in the present chapter, the pharmaceutics of *caturaṅgula* are being expounded.

Synonyms

आरग्वधो राजवृक्षः शम्पाकश्चतुरङ्गुलः।
प्रग्रहः कृतमालश्च कर्णिकारोऽवघातकः।।३।।

Āragvadha, rājavṛkṣa, śampāka, caturaṅgula, pragraha, kṛtamāla, karṇikāra and *avaghātaka* — these are synonymous.

Therapeutic Utility

ज्वरहृद्रोगवातासृगुदावर्तादिरोगिषु ।
राजवृक्षोऽधिकं पथ्यो मृदुर्मधुरशीतलः।।४।।
बाले वृद्धे क्षते क्षीणे सुकुमारे च मानवे।
योज्यो मृद्वनपायित्वाद्विशेषाच्चतुरङ्गुलः।।५।।

Because of its mildness, sweet taste and cooling effect, *rāja-vṛkṣa* (*caturaṅgula*) is exceedingly useful (as a purgative) for diseases like fever, cardiac ailments, *vāta-rakta* (gout) and *udāvarta* (upward movement of wind in the abdomen).

Because of mildness and innocuousness, *caturaṅgula* is specially suitable as purgative for children, old people, patients

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suffering from phthisis and emaciation, and for persons having delicate constitution. [4-5]

Processing of Āragvadha

फलकाले फलं तस्य ग्राह्यं परिणतं च यत्।
तेषां गुणवतां भारं सिकतासु निधापयेत्।। ६।।
सप्तरात्रात् समुद्धृत्य शोषयेदातपे भिषक्।
ततो मज्जानमुद्धृत्य शुचौ भाण्डे निधापयेत्।। ७।।

During appropriate seasons of fruiting, the matured fruits of *āragvadha* (*caturaṅgula*) should be collected. These fruits endowed with therapeutic attributes should be taken in large quantity and kept covered with sand for seven days. Thereafter, these fruits should be taken out of the sand and dried in the sun. The pulp of these fruits should then be taken out and stored in a clean jar. [6-7]

Recipe of Āragvadha (Caturaṅgula) to be Taken along with Fruit Juice

द्राक्षारसयुतं दद्याद्दाहोदावर्तपीडिते।
चतुर्वर्षमुखे बाले यावद्द्वादशवार्षिके।। ८।।
चतुरङ्गुलमज्ज्ञस्तु प्रसृतं वाऽथवाऽञ्जलिम्।

The patient aged between four to twelve years and suffering from *dāha* (burning syndrome) as well as *udāvarta* (upward movement of wind in the abdomen) should be given one *prasṛta* (48 Gms. approx.) or one *añjali* (96 Gms. approx.) of the pulp of *āragvadha* (*caturaṅgula*) along with grape-juice. [8 - $^{1}/_{2}$ 9.]

Specific mention of the age of the patient in the above text implies that this recipe should not be given to patients below four years, and above twelve years of age.

Recipes of Āragvadha (Caturaṅgula) to be Taken along with Surā-maṇḍa, etc.

सुरामण्डेन संयुक्तमथवा कोलसीधुना।। ९।।
दधिमण्डेन वा युक्तं रसेनामलकस्य वा।

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कृत्वा शीतकषायं तं पिबेत् सौवीरकेण वा।। १०।।

Śīta-kaṣāya or cold infusion [of one *prasṛta* (48 Gms. approx.) or one *añjali* (96 Gms. approx.) of the pulp of *āragvadha*] may also be given along with the following vehicles :

(1) *Surā-maṇḍa* (supernatant fluid of *surā* type of alcoholic drink);

(2) *Kola-sīdhu* (a type of wine prepared of jujube-fruit);

(3) *Dadhi-maṇḍa* (whey);

(4) Juice of *āmalakī*; or

(5) *Sauvīraka* (a type of vinegar). [$9^1/_2$ - 10]

Recipes of Āragvadha to be Taken with Decoctions

त्रिवृतो वा कषायेण मज्ज्ञः कल्कं तथा पिबेत्।
तथा बिल्वकषायेण लवणक्षौद्रसंयुतम्।। ११।।

Similarly, the pulp of *āragvadha* should be made to a paste and taken along with the decoction of either *trivṛt* or *bilva* by adding salt and honey. [11]

These two recipes are also described in *Jatūkarṇa-saṃhitā*.

Recipe of Āragvadha Prepared in the form of Linctus

कषायेणाथवा तस्य त्रिवृच्चूर्णं गुडान्वितम्।
साधयित्वा शनैर्लेहं लेहयेन्मात्रया नरम्।। १२।।

A linctus should be prepared of the decoction of *āragvadha* added with the powder of *trivṛt* and jaggery by cooking over mild fire. This linctus should be taken in appropriate dose [for purgation]. [12]

Recipes of Āragvadha Prepared in the form of Medicated Ghee

चतुरङ्गुलसिद्धाद्वा क्षीराद्यदुदियाद्घृतम्।
मज्ज्ञः कल्केन धात्रीणां रसे तत्साधितं पिबेत्।। १३।।
तदेव दशमूलस्य कुलत्थानां यवस्य च।
कषाये साधितं सर्पिः कल्कैः श्यामादिभिः पिबेत्।। १४।।

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Milk should be boiled with *āragvadha,* and from the cream of this medicated milk, ghee should be prepared. This ghee should be cooked by adding the paste of the pulp of *āragvadha* and the juice of *āmalakī.* [This medicated ghee should be taken for purgation.]

The ghee prepared in the above mentioned manner should be cooked by adding the decoction of *daśa-mūla* (*bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*), *kulattha* and *yava* as well as the paste of (nine drugs, viz.,) *śyāmā,* (*trivṛt, caturaṅgula, tilvaka, mahā-vṛkṣa, pāṭalā, śaṅkhinī, dantī* and *dravantī*). [13-14]

Recipe of Āragvadha in the form of Ariṣṭa

दन्तीक्वाथेऽञ्जलिं मज्ज्ञः शम्पाकस्य गुडस्य च।
दत्त्वा मासार्धमासस्थमरिष्टं पाययेत च।।१५।।

In the decoction of *dantī,* one *añjali* (96 Gms. approx.) each of the pulp of *śampāka* (*āragvadha*) and jaggery should be added and kept [to ferment]for one and half months. The *ariṣṭa* (medicated wine) thus prepared should be taken as a potion [for purgation]. [15]

Use of Āragvadha added to Food and Drinks

यस्य यत् पानमन्नं च हृद्यं स्वाद्वथ वा कटु।
लवणं वा भवेत्तेन युक्तं दद्याद्विरेचनम्।।१६।।

[*Āragvadha*] should be administered as purgative by adding to either sweet, pungent or saline food and drinks which are pleasing to the heart of the patient. [16]

Contents of Chapter

तत्र श्लोकाः—
द्राक्षारसे सुरासीध्वोर्दध्नि चामलकीरसे।
सौवीरके कषाये च त्रिवृतो बिल्वकस्य च।।१७।।
लेहेऽरिष्टे घृते द्वे च योगा द्वादश कीर्तिताः।
चतुरङ्गुलकल्पेऽस्मिन् सुकुमाराः सुखोदयाः।।१८।।

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To sum up :

In this chapter dealing with the pharmaceutics of *āragvadha,* twelve purgative recipes are described for the happiness of persons of delicate nature. These recipes are as follows :

(1) One recipe to be taken along with grape juice; (vide verse no. 8)

(2-8) One recipe each of (1) *surā* (alcohol), (2) *sīdhu* (a type of wine), (3) *dadhi* (whey), (4) juice of *āmalakī,* (5) *sauvīra*, (6) decoction of *trivṛt* and (7) decoction of *bilva*; (vide verse nos. 9-11)

(9) One recipe in the form of linctus; (vide verse no. 12)

(10) One recipe in the form of medicated wine; and (vide verse no. 15)

(11-12) Two recipes in the form of medicated ghee. (vide verse nos. 13-14) [17-18]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते
दृढबलसंपूरिते कल्पस्थाने चतुरङ्गुलकल्पो
नामाष्टमोऽध्यायः ॥ ८ ॥

Thus, ends the eighth chapter of *Kalpa-sthāna* dealing with the "Pharmaceutics of *Caturaṅgula*" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - IX

नवमोऽध्यायः

(PHARMACEUTICS OF TILVAKA)

Prologue

अथातस्तिल्वककल्पं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

Now we shall expound the chapter dealing with the "Pharmaceutics of *Tilvaka*".

Thus, said Lord Ātreya. [1-2]

Synonyms

तिल्वकस्तु मतो लोध्रो बृहत्पत्रस्तिरीटकः।

Tilvaka is known by the synonyms like *lodhra, bṛhat-patra* and *tirīṭaka*. [$^{1}/_{2}$ 3]

Processing of Tilvaka

तस्य मूलत्वचं शुष्कामन्तर्वल्कलवर्जिताम्।।३।।
चूर्णयेत्तु त्रिधा कृत्वा द्वौ भागौ श्रोतयेत्ततः।
लोध्रस्यैव कषायेण तृतीयं तेन भावयेत्।।४।।
भागं तं दशमूलस्य पुनः क्वाथेन भावयेत्।
शुष्कं चूर्णं पुनः कृत्वा तत ऊर्ध्वं प्रयोजयेत्।।५।।

The dry root-bark of *tilvaka* which is free from its inner layer should be pounded, and made to three parts. Two parts of this powder should be added with water and strained by the process of percolation. With this liquid the third part of the powder of *tilvaka* should be impregnated. Thereafter, this powder should again be impregnated with the decoction of *daśa-mūla* (*bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*). This should then be dried and made to a powder again and used [in recipes]. [$3^{1}/_{2}$ - 5]

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The inner part of the root-bark of *tilvaka* is not useful in recipes because of its hardness. Therefore, it should be removed.

For percolation, the powder should be added with six times of water. This process should be repeated for twenty one times as suggested in respect of *madana-phala* (vide *Kalpa* 1 : 16).

Recipes of Tilvaka with Whey, etc.

दधितक्रसुरामण्डमूत्रैर्बदरसीधुना ।
रसेनामलकानां वा ततः पाणितलं पिबेत्।। ६।।

One *pāṇi-tala* (12 Gms. approx.) of this powder should be taken along with the following vehicles :

(1) *Dadhi-takra* (whey);

(2) *Surā-maṇḍa* (supernatant part of alcohol);

(3) Cow's urine;

(4) *Badara-sīdhu* (a type of sour drink prepared of jujube); and

(5) Juice of *āmalakī*. [6]

In the above text, five recipes of *tilvaka* are described.

Recipe of Tilvaka in the form of Sauvīraka

मेषशृङ्ग्यभयाकृष्णाचित्रकैः सलिले शृते।
मरुजान् सुनुयात्तच्च जातं सौवीरकं यदा।। ७।।
भवेदञ्जलिना तस्य लोध्रकल्कं पिबेत् सदा।

To the decoction of *meṣa-śṛṅgī, abhayā, kṛṣṇā* and *citraka*, roasted barley should be added and fermented. The paste of *lodhra* should be mixed with one *añjali* (96 ml. approx.) of this *sauvīraka*, and taken as a potion. [7-$^1/_2$ 8]

Recipe of Tilvaka in the form of Surā

सुरां लोध्रकषायेण जातां पक्षस्थितां पिबेत्।। ८।।

Surā (alcoholic drink) prepared of the decoction of *lodhra* by keeping (fermenting) it for a fortnight should be taken as a potion. [8$^1/_2$]

Recipe of Tilvaka in the form of Ariṣṭa

दन्तीचित्रकयोर्द्रोणे सलिलस्याढकं पृथक्।

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समुत्क्वाथ्य गुडस्यैकां तुलां लोध्रस्य चाञ्जलिम्।। ९।।
आवपेत्तत् परं पक्षान्मद्यपानां विरेचनम्।

One *droṇa* each of *dantī* and *citraka* should be added with one *āḍhaka* of water, and a decoction should be prepared. To this decoction, one *tulā* of jaggery and one *añjali* of the powder of *lodhra* should be added and allowed to ferment. The *ariṣṭa* (medicated wine) thus prepared by keeping the recipe for a fortnight is an excellent purgative potion for persons habituated to the intake of wine. [9-$^1/_2$ 10]

Recipe of Tilvaka Prepared along with Kampillaka

कम्पिल्लकंकषायेण दशकृत्वः सुभावितम्।। १०।।
मात्रां कम्पिल्लकस्यैव कषायेण पुनः पिबेत्।

The powder of *tilvaka* should be well impregnated with the decoction of *kampillaka* for ten times. A dose of this recipe should be taken again with the decoction of *kampillaka*. [$10^1/_2$ - $^1/_2$ 11]

Recipes of Tilvaka in the form of Linctus

चतुरङ्गुलकल्पेन लेहोऽन्यः कार्य एव च।। ११।।
त्रिफलायाः कषायेण ससर्पिर्मधुफाणितः।
लोध्रचूर्णयुतः सिद्धो लेहः श्रेष्ठो विरेचने।। १२।।
तिल्वकस्य कषायेण कल्केन च सशर्करः।
सघृतः साधितो लेहः स च श्रेष्ठो विरेचने।। १३।।

A linctus of *tilvaka* should be prepared on the line suggested for *caturaṅgula* (vide *Kalpa* 8 : 12).

Linctus should be prepared by adding the powder of *lodhra*, ghee, honey and *phāṇita* (penidium) to the decoction of *triphalā* (*harītakī, vibhītaka* and *āmalakī*). It is an excellent recipe for purgation.

To the decoction of *tilvaka,* its paste, sugar and ghee should be added and cooked. This linctus is excellently useful for purgation. [$11^1/_2$ - 13]

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Recipes of Tilvaka in the form of Medicated Ghee

अष्टाष्टौ त्रिवृतादीनां मुष्टींस्तु सनखान् पृथक्।
द्रोणेऽपां साधयेत् पादशेषे प्रस्थं घृतात् पचेत्।। १४।।
पिष्टैस्तैरेव बिल्वांशैः समूत्रलवणैरथ।
ततो मात्रां पिबेत् काले श्रेष्ठमेतद्विरेचनम्।। १५।।
लोध्रकल्केन मूत्राम्ललवणैश्च पचेद्घृतम्।
चतुरङ्गुलकल्पेन सर्पिषी द्वे च साधयेत्।। १६।।

Eight fistfuls each of *śyāmā, trivṛt,* (*caturaṅgula, mahā-vṛkṣa, saptalā, śaṅkhinī, dantī* and *dravantī*) and sixteen fistfuls of *tilvaka*-powder should be boiled by adding one *droṇa* of water separately till one fourth of the liquid remains. These decoctions should then be mixed together. To this, one *prastha* of ghee, one *bilva* of the paste each of the nine drugs described above, and one *pala* each of cow's urine as well as salt should be added. This should then be cooked. It should be taken at the appropriate time and in appropriate dose which is an excellently useful potion for purgation.

By adding the paste of *lodhra*, cow's urine, sour liquid and salt, ghee may also be cooked.

In *Kalpa* 8 : 13-14, two recipes of medicated ghee of *caturaṅgula* are described. Following the same procedure, two recipes of medicated ghee containing *tilvaka* may also be prepared [and used for purgation]. [14-16]

For the preparation of decoction of *lodhra*, the drug should be taken in double the quantity though it is not specified in the text. Doubling the quantity of *lodhra* is necessary to justify the inclusion of the recipe in the present chapter. This view is also supported by the statement of *Jatūkarṇa.*

In the above text, four recipes of *lodhra* in the form of medicated ghee are described.

Contents of Chapter

तत्र श्लोकौ–
पञ्च दध्यादिभिस्त्वेका सुरा सौवीरकेण च।

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एकोऽरिष्टस्तथा योग एकः कम्पिल्लकेन च।। १७।।
लेहास्त्रयो घृतेनापि चत्वारः संप्रकीर्तिताः।
योगास्ते लोध्रमूलानां कल्पे षोडश दर्शिताः।। १८।।

To sum up :

In this chapter, sixteen recipes of the root of *lodhra* are described as follows :

(1-5) Five recipes with *dadhi-takra, surā-maṇḍa, mūtra, badara-sīdhu* and juice of *āmalakī;* (vide verse no. 6)

(6) One recipe of *lodhra* in the form of *surā*; (vide verse no. 8)

(7) One recipe to be taken along with *sauvīraka*; (vide verse nos. 7-8)

(8) One recipe in the form of *ariṣṭa*; (vide verse no. 9)

(9) One recipe of *lodhra* to be taken along with *kampillaka*; (vide verse nos. 10-11)

(10-12) Three recipes of *lodhra* prepared in the form of linctus; and (vide verse nos. 11-13)

(13-16) Four recipes of *lodhra* in the form of medicated ghee. (vide verse nos. 14-16) [17 - 18]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढ-
बलसंपूरिते कल्पस्थाने तिल्वककल्पो नाम नवमोऽध्यायः।। ९।।

Thus, ends the ninth chapter of *Kalpa*-section dealing with the "Pharmaceutics of *Tilvaka*" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - X

दशमोऽध्यायः

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(PHARMACEUTICS OF SUDHĀ)

Prologue

अथातः सुधाकल्पं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

Now we shall expound the chapter dealing with the "Pharmaceutics of *Sudhā*".

Thus, said Lord Ātreya. [1-2]

In the previous chapter pharmaceutics of *tilvaka* having sixteen recipes was described. The present chapter on the pharmaceutics of *sudhā* has twenty recipes. Thus, chapters having gradually increasing number of recipes in succession will be described hereafter seriatim.

Effects of Sudhā

विरेचनानां सर्वेषां सुधा तीक्ष्णतमा मता।
सङ्घातं हि भिनत्त्याशु दोषाणां कष्टविभ्रमा।।३।।
तस्मान्नैषा मृदौ कोष्ठे प्रयोक्तव्या कदाचन।
न दोषनिचये चाल्पे सति मार्गपरिक्रमे।।४।।

Sudhā is the strongest (sharpest) among all the purgative drugs. It quickly disintegrates the accumulated impurities. Wrong use of this drug may lead to consequences which are difficult to handle. Therefore, it should never be administered to a person having laxed bowel. It should also not be administered when there is less accumulation of *doṣas* and when other therapeutic measures are available for correcting the malady. [3-4]

When other measures for correcting the malady are available then *sudhā* should never be used. Its inappropriate administration may lead to unmanageable adverse reactions because of its instantaneous sharp action.

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Indications of Sudhā

पाण्डुरोगोदरे गुल्मे कुष्ठे दूषीविषार्दिते।
श्वयथौ मधुमेहे च दोषविभ्रान्तचेतसि।। ५।।
रोगैरेवंविधैर्ग्रस्तं ज्ञात्वा सप्राणमातुरम्।
प्रयोजयेन्महावृक्षं सम्यक् स ह्यवचारितः।। ६।।
सद्यो हरति दोषाणां महान्तमपि संचयम्।

Mahā-vṛkṣa (*sudhā*) should be administered to a strong person suffering from *pāṇḍu* (anemia), *udara* (obstinate abdominal diseases including ascites), *gulma* (phantom tumour), *kuṣṭha* (obstinate skin diseases including leprosy), *dūṣī-viṣa* (poisoning caused by artificially made toxic ingredients), *śvayathu* (oedema), *madhu-meha* or *prameha* (obstinate urinary disorders) *unmāda* (insanity) and such other diseases. If properly administered, it quickly eliminates the *doṣas* even if they are excessively accumulated. [5-$^1/_2$7]

The term '*madhu-meha*' generally implies diabetes mellitus which is caused by the excessive aggravation of *vāyu*. This condition is incurable. Therefore, prescribing a purgative remedy for its treatment appears to be inappropriate. In the present context, the term '*madhu-meha*' actually implies '*prameha*' which means obstinate urinary disorders in general. Use of *madhu-meha* and *prameha* as synonyms is already explained in the commentary on *Cikitsā* 6 : 57.

The term "*doṣa-vibhrānta-cetasi*" meaning perversion (*vibhrānta*) of the mind (*cetasi*) because of aggravated *doṣas* implies *unmāda* or insanity.

Varieties of Sudhā

द्विविधः स मतोऽल्पैश्च बहुभिश्चैव कण्टकैः।। ७।।
सुतीक्ष्णैः कण्टकैरल्पैः प्रवरो बहुकण्टकः।

Sudhā is of two types — one type of which has small but numerous thorns, and the other type has less but sharp thorns. The one having numerous thorns (i.e. the former) is better than the other (i.e. the latter). [$7^1/_2$ - $^1/_2$ 8]

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Synonyms

स नाम्ना स्नुग्गुडा नन्दा सुधा निस्त्रिंशपत्रकः।। ८।।

Snuk, guḍā, nandā, sudhā and *nistriṃśa-patraka* — these are synonymous. [$8^{1}/_{2}$]

Method of Collection

तौ विपाट्याहरेत् क्षीरं शस्त्रेण मतिमान् भिषक्।
द्विवर्षं वा त्रिवर्षं वा शिशिरान्ते विशेषतः।। ९।।

A wise physician should incise these two types of plants of *sudhā* with the help of a sharp instrument to collect its milky latex. The tree of *sudhā* should be two to three years old, and the milk should be collected specially at the end (last part) of the winter. [9]

In *Kalpa* 1 : 10, milk from plants is prescribed to be collected during autumn. But in the instant case, milk of *sudhā* is prescribed to be collected at the end of winter. This is an exceptional case.

Recipes of Sudhā to be Taken along with Sauvīraka, etc.

बिल्वादीनां बृहत्या वा कण्टकार्यास्तथैकशः।
कषायेण समांशं तं कृत्वाऽङ्गारेषु शोषयेत्।। १०।।
ततः कोलसमां मात्रां पिबेत् सौवीरकेण वा।
तुषोदकेन कोलानां रसेनामलकस्य वा।। ११।।
सुरया दधिमण्डेन मातुलुङ्गरसेन वा।

The milk of *sudhā* should be mixed with equal quantity of the decoction of either *bilva*, (*śyonāka, gambhārī, pāṭalā* and *gaṇikārikā*), *bṛhatī* or *kaṇṭakārī*, and made to get dried in a pan kept over charcoal fire. From out of this paste, pills of the size of *kola* should be prepared. These pills should be taken along with either of the following vehicles :

(1) *Sauvīraka* (sour vinegar);

(2) *Tuṣodaka* (sour fermented liquid prepared of husked paddy, etc.);

(3) Juice of *kola* (jujube-fruit);

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(4) Juice of *āmalakī*;

(5) *Surā* (alcohol);

(6) *Dadhi-maṇḍa* (whey); or

(7) Juice of *mātuluṅga*. [10 - $^{1}/_{2}$ 12]

Along with seven vehicles, seven recipes of *sudhā* are described in the above text.

Recipes of Sudhā to be Taken with Ghee, etc.

सातलां काञ्चनक्षीरीं श्यामादीनि कटुत्रिकम्।। १२।।
यथोपपत्ति सप्ताहं सुधाक्षीरेण भावयेत्।
कोलमात्रां घृतेनातः पिबेन्मांसरसेन वा।। १३।।

From amongst *sātalā, kāñcana-kṣīrī, śyāmā,* [*trivṛt, caturaṅgula, tilvaka, mahā-vṛkṣa, saptalā, śaṅkhinī, dantī, dravantī*], *śuṇṭhī, pippalī* and *marica*, as many as are available should be collected, and made to powder. This powder should be impregnated with the latex of *sudhā* for one week. From out of this paste, pills of the size of one *kola* should be prepared. These pills should be taken with either of the following vehicles :

(1) Ghee; or

(2) Meat-soup [$12^{1}/_{2}$ - 13]

Along with two vehicles, viz., ghee and meat-soup, two recipes of *sudhā* are described in the above text.

The above mentioned two recipes are curative of aggravated *vāyu* as these are to be taken with two *vāyu*-alleviating drugs like ghee and meat-soup.

Sātalā (*saptalā*) is mentioned twice in the above text. By implication, *sātalā* (*saptalā*) is an important product, and the recipe of *sudhā* prepared with it alone is very effective.

Recipe of Sudhā in the form of Pānaka

त्र्यूषणं त्रिफलां दन्तीं चित्रकं त्रिवृतां तथा।
स्नुक्क्षीरभावितं सम्यग्विदध्याद्गुडपानकम्।। १४।।

Śuṇṭhī, pippalī, marica, harītakī, vibhītaka, āmalakī,

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dantī, citraka and *trivṛt* should be impregnated with the milky latex of *snuhī*. In the form of a syrup prepared with jaggery, [it should be administered for purgation]. [14]

Recipe of Sudhā to be Used for Inhalation

त्रिवृतारग्वधं दन्तीं शङ्खिनीं सप्तलां समम्।
गोमूत्रे रजनीं कृत्वा शोषयेदातपे ततः।।१५।।
सप्ताहं भावयित्वैवं स्नुक्क्षीरेणापरं पुनः।
सप्ताहं भावयेच्छुष्कं ततस्तेनापि भावितम्।।१६।।
गन्धमाल्यं तदाघ्राय प्रावृत्य पटमेव च।
सुखमाशु विरिच्यन्ते मृदुकोष्ठा नराधिपाः।।१७।।

Trivṛt, āragvadha, dantī, śaṅkhinī and *saptalā* should be taken in equal quantities and made to a powder. This should be impregnated with cow's urine for one night and dried in the sun. This process should be repeated for seven days. This recipe should again be impregnated for one week with the milky latex of *snuhī*. Aromatic garlands should be sprinkled with this powder and upper garments should be impregnated with the water mixed with this powder [of the milky latex]. By the inhalation of this garland or by wearing this upper garment, a person of royal descent or a person who has laxed bowel gets purgation easily and quickly. [15 - 17]

Recipe of Sudhā Prepared in the form of Linctus

श्यामात्रिवृत्कषायेण स्नुक्क्षीरघृतफाणितैः।
लेहं पक्त्वा विरेकार्थं लेहयेन्मात्रया नरम्।।१८।।

The decoction of *śyāmā-trivṛt* should be added with the milky latex of *snuhī*, ghee and *phāṇita* (penidium), and cooked. This linctus should be taken by a person in appropriate dose for the purpose of purgation. [18]

Recipe of Sudhā to be Taken with Vegetable-soup, etc.

पाययेत्तु सुधाक्षीरं यूषैर्मांसरसैर्घृतैः।

The milky latex of *sudhā* should be given as a potion along with either vegetable-soup, meat-soup or ghee [for purgation]. [½ 19]

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With three vehicles, three different recipes of *sudhā* are described in the above text.

Recipes of Sudhā to be Taken with Dried Fish or Dried Meat

भाविताञ्छुष्कमत्स्यान् वा मांसं वा भक्षयेन्नरः।। १९।।

Dry fish or dry meat should be impregnated with the milky latex of *sudhā* and taken [for purgation]. [$19^1/_2$]

With dry fish and dry meat, two recipes of *sudhā* are described in the above text.

Recipes of Sudhā in the form of Medicated Ghee and Alcohol

क्षीरेणामलकैः सर्पिश्चतुरङ्गुलवत् पचेत्।
सुरां वा कारयेत् क्षीरे घृतं वा पूर्ववत् पचेत्।। २०।।

Following the procedure described in respect of *caturaṅgula* (vide *Kalpa* 8 : 13), medicated ghee should be prepared of the milky latex of *sudhā* and taken along with [the juice of] *āmalakī*.

Surā (alcoholic drink) should be prepared of [the powder of *śuṇṭhī, pippalī, marica, harītakī, vibhītaka, āmalakī, dantī, citraka* and *trivṛt* impregnated with] the milky latex of *snuhī*. Medicated ghee may also be prepared with the latex of *snuhī* [these recipes may be used for purgation] according to the method prescribed before. [20]

Contents of Chapter

तत्र श्लोकौ–
सौवीरकादिभिः सप्त सर्पिषा च रसेन च।
पानकं घ्रेयलेहौ च योगा यूषादिभिस्त्रयः।। २१।।
द्वौ शुष्कमत्स्यमांसाभ्यां सुरैका द्वे च सर्पिषी।
महावृक्षस्य योगास्ते विंशतिः समुदाहृताः।। २२।।

To sum up :

In this chapter, twenty recipes of *mahā-vṛkṣa* (*sudhā*) are illustrated as follows :

(1-7) Seven recipes of *sudhā* to be taken along with *sauvīraka*, etc.;
(vide verse nos. 10-12)

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(8-9) Two recipes of *sudhā* to be taken along with ghee and meat-soup;
(vide verse no. 13)

(10) One recipe in the form of syrup;
(vide verse no. 14)

(11) One recipe of *sudhā* for inhalation;
(vide verse nos. 15-17)

(12) One recipe of *sudhā* in the form of linctus;.
(vide verse no. 18)

(13-15) Three recipes of *sudhā* to be taken along with vegetable-soup, meat-soup and ghee;
(vide verse no. 19)

(16-17) Two recipes of*sudhā* to be taken along with dry fish and dry meat;
(vide verse no. 19)

(18) One recipe of *sudhā* to be taken in the form of alcoholic drink; and
(vide verse no. 20)

(19-20) Two recipes of *sudhā* to be prepared in the form of medicated ghee (including alcohol).
(vide vrse no. 20) [21-22]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते
दृढबलसंपूरिते कल्पस्थाने सुधाकल्पो
नाम दशमोऽध्यायः ।। १० ।।

Thus, ends the tenth chapter of *Kalpa-sthāna* dealing with the "Pharmaceutics of *Sudhā*" in the Agniveśa's work redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - XI

एकादशोऽध्यायः

(PHARMACEUTICS OF SAPTALĀ-ŚAṄKHINĪ)

Prologue

अथातः सप्तलाशङ्खिनीकल्पं व्याख्यास्यामः।। १।।
इति ह स्माह भगवानात्रेयः।। २।।

Now we shall expound the chapter dealing with the "Pharmaceutics of *Saptalā* and *Śaṅkhinī*".

Thus, said Lord Ātreya. [1-2]

In the Seventh chapter of *Kalpa*-section recipes of both *śyāmā* and *trivṛt* are described. Similarly, in the present chapter, the recipes of both *saptalā* and *śaṅkhinī* will be described. These recipes can be prepared of either *saptalā* or *śaṅkhinī* or both.

Synonyms

सप्तला चर्मसाह्वा च बहुफेनरसा च सा।
शङ्खिनी तिक्तला चैव यवतिक्ताऽक्षि(क्ष)पीडकः।। ३।।

Saptalā, carmasāhvā and *bahu-phena-rasā*—these are synonymous. Similarly, *śaṅkhinī, tiktalā, yava-tiktā* and *akṣi(a)-pīḍaka* are synonymous. [3]

Therapeutic Effects

ते गुल्मगरहृद्रोगकुष्ठशोफोदरादिषु।
विकासितीक्ष्णरूक्षत्वाद्योज्ये श्लेष्माधिकेषु तु।। ४।।

Because of their attributes, viz., *vikāsitva* (which causes looseness of joints), *tīkṣṇatva* (sharpness) and *rūkṣatva* (ununctuousness), these two drugs (*saptalā* and *śaṅkhinī*) should be used in the treatment of *gulma* (phantom tumour), *gara* (poisoning), *hṛd-roga* (heart diseases), *kuṣṭha* (obstinate skin diseases including leprosy), *śopha* (oedema), *udara*

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(obstinate abdominal diseases including ascites) and such other conditions caused by aggravated *kapha*. [4]

Method of Collection

नातिशुष्कं फलं ग्राह्यं शङ्खिन्या निस्तुषीकृतम्।
सप्तलायाश्च मूलानि गृहीत्वा भाजने क्षिपेत्।। ५।।

The fruits of *śaṅkhinī* should be collected when these are not very dry and excorticated.

The roots of *saptalā* should be collected for use. Both of these should be preserved in a pot. [5]

Recipes of Saptalā and Śaṅkhinī to be Taken along with Decoctions, etc.

अक्षमात्रं तयोः पिण्डं प्रसन्नालवणायुतम्।
हृद्रोगे कफवातोत्थे गुल्मे चैव प्रयोजयेत्।। ६।।
प्रियालपीलुकर्कन्धुकोलाम्रातकदाडिमैः ।
द्राक्षापनसखर्जूरबदराम्लपरूषकैः ।। ७।।
मैरेये दधिमण्डेऽम्ले सौवीरकतुषोदके।
सीधौ चाप्येष कल्पः स्यात् सुखं शीघ्रविरेचनः।। ८।।

One *akṣa* of the paste of *saptalā* and *śaṅkhinī* should be added with *prasannā* (a type of wine) and salt. This is useful for *hṛd-roga* (heart diseases) caused by *kapha* and *vāyu*, and for *gulma* (phantom tumour). This recipe should be administered with the vehicles as follows :

(1) Decoction of *priyāla;*
(2) Decoction of *pīlu;*
(3) Decoction of *karkandhu;*
(4) Decoction of *kola*;
(5) Juice of *āmrātaka*;
(6) Juice of *dāḍima;*
(7) Juice of *drākṣā;*
(8) Juice of *panasa;*
(9) Juice of *kharjūra;*

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(10) *Badarāmla* (sour preparation of jujube-fruit);

(11) Juice of *parūṣaka*;

(12) *Maireya* (a sour drink);

(13) *Amla dadhi-maṇḍa* (sour whey);

(14) *Sauvīraka* (vinegar);

(15) *Tuṣodaka* (another sour drink prepared of paddy, etc.); and

(16) *Sīdhu* (a type of wine).

Intake of these recipes help in easy and quick purgation. [6 - 8]

With sixteen different vehicles, sixteen recipes of *saptalā* and *śaṅkhinī* are described in the above text. In the verse no. 18 enumerating the contents of this chapter, all the above mentioned recipes are described under the category of decoction (*kaṣāya*) eventhough some of these vehicles are not decoctions. Since decoctions constitute the major items, all these recipes are included under the group of *kaṣāya* (decoction).

Recipes of Saptalā and Śaṅkhinī in the form of Medicated Oil

तैलं विदारिगन्धाद्यैः पयसि क्वथिते पचेत्।
सप्तलाशङ्खिनीकल्के त्रिवृच्छ्यामार्धभागिके।। ९।।
दधिमण्डेन सन्नीय सिद्धं तत् पाययेत च।
शङ्खिनीचूर्णभागौ द्वौ तिलचूर्णस्य चापरः।। १०।।
हरीतकीकषायेण तैलं तत्पीडितं पिबेत्।
अतसीसर्षपैरण्डकरञ्जेष्वेष संविधिः।। ११।।

Milk should be boiled by adding drugs belonging to *Vidāri-gandhādi* group. Oil should be cooked by adding this milk, the paste of *saptalā* and *śaṅkhinī* (one part), and *trivṛt* as well as *śyāmā* (half parts). This medicated oil should be added to *dadhi-maṇḍa* (whey) and administered as a potion [for purgation].

Two parts of the powder of *śaṅkhinī* should be added with one part of the powder of sesamum seed, and oil should be expressed out of it. This oil should be taken along with the decoction of *harītakī* [for purgation].

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Following the same procedure, oil should be expressed from the seeds of *atasī, sarṣapa, eraṇḍa* and *karañja*, [and taken along with the decoction of *harītakī* for purgation].

[9 - 11]

In the above text, five recipes of *saptalā-śaṅkhinī* in the form of medicated oil are described.

Recipes of Saptalā and Śaṅkhinī in the form of Medicated Ghee, etc.

शङ्खिनीसप्तलासिद्धात् क्षीराद्यदुदियाद्घृतम्।
कल्कभागे तयोरेव त्रिवृच्छ्यामार्धसंयुते।। १२।।
क्षीरेणालोडच्य संपक्वं पिबेत्तच्च विरेचनम्।
दन्तीद्रवन्त्योः कल्पोऽयमजशृङ्ग्यजगन्धयोः।। १३।।
क्षीरिण्या नीलिकायाश्च तथैव च करञ्जयोः।
मसूरविदलायाश्च प्रत्यक्पर्ण्यास्तथैव च।। १४।।
द्विवर्गार्धांशकल्केन तद्वत् साध्यं घृतं पुनः।
शङ्खिनीसप्तलाधात्रीकषाये साधयेद्घृतम्।। १५।।
त्रिवृत्कल्पेन सर्पिश्च त्रयो लेहाश्च लोध्रवत्।
सुराकम्पिल्लयोर्योगः कार्यो लोध्रवदेव च।। १६।।

From the milk boiled with *śaṅkhinī* and *saptalā*, ghee should be taken out. This ghee should be cooked by adding one part of the paste of *saptalā* and *śaṅkhinī*, and half part of the paste of *trivṛt* as well as *śyāmā*. This medicated ghee should be mixed with milk and taken as potion for purgation.

In the place of the paste of *trivṛt* and *śyāmā*, the above mentioned medicated ghee may also be prepared by adding half part of the paste of the following drugs :

(1) *Dantī* and *dravantī*;

(2) *Aja-śṛṅgī (viṣāṇikā)* and *aja-gandhā*;

(3) *Kṣīriṇī (dugdhikā)* and *nīlikā;*

(4) Two varieties of *karañja;* and

(5) *Masūra-vidalā (śyāma-latā)* and *pratyak-parṇī (mūṣika-parṇī)*.

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Medicated ghee may also be prepared by boiling ghee with the decoction of *śaṅkhinī, saptalā* and *āmalakī.*

Medicated ghee of *saptalā-śaṅkhinī* may also be prepared according to the procedure described for the preparation of medicated ghee of *trivṛt* (vide *Kalpa* 8 : 66-68).

Following the procedure prescribed for *lodhra,* three types of *leha* or linctus (vide *Kalpa* 9 : 11-13), *surā* or alcoholic drink (vide *Kalpa* 9 : 8-9) and recipe of *kampillaka* (vide *Kalpa* 9 : 10-11), may also be prepared of *saptalā* and *śaṅkhinī.* [12-16]

In the above texts, eight recipes of *saptalā-śaṅkhinī* in the form of medicated ghee; three recipes in the form of linctus; one recipe in the form of alcoholic drink; and one recipe prepared with *kampillaka* are described.

Recipes of Saptalā and Śaṅkhinī in the form of Fermented Drink

दन्तीद्रवन्त्योः कल्पेन सौवीरकतुषोदके।
अजगन्धाजशृङ्ग्योश्च तद्वत् स्यातां विरेचने।। १७।।

According to the procedure to be described in respect of *dantī-dravantī* (vide *Kalpa* 12 : 35), *sauvīraka* (vinegar) and *tuṣodaka* (a type of sour drink prepared of husked paddy, etc.) of *saptalā* and *śaṅkhinī* should be prepared.

Similarly, *gauḍa* type of wine of *saptalā* and *śaṅkhinī* may also be prepared by adding *aja-gandhā* and *aja-śṛṅgī* (on the lines suggested in *Kalpa* 12 : 33).

These [four recipes] are useful for purgation. [17]

While summarising the contents of the chapter in verse no. 18, the above mentioned four recipes will be described as *madya* (fermented drink) because these preparations involve the process of fermentation.

As described in *Kalpa* 12 : 35, even the decoction of *aja-gandhā* should be added to *saptalā-śaṅkhinī* for the preparation of *sauvīraka* and *tuṣodaka* referred to in the above text.

Contents of Chapter

तत्र श्लोकौ-
कषाया दश षट् चैव षट् तैलेऽष्टौ च सर्पिषि।

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षञ्च मद्ये त्रयो लेहा योगः कम्पिल्लके तथा।।१८।।
सप्तलाशङ्खिनीभ्यां ते त्रिंशदुक्ता नवाधिकाः।
योगाः सिद्धाः समस्ताभ्यामेकशोऽपि च ते हिताः।।१९।।

To sum up :

In this chapter thirty nine effective recipes of *saptalā* and *śaṅkhinī* are described as follows :

(1-6) Sixteen recipes of *saptalā* and *śaṅkhinī* to be taken along with decoctions, etc.; (vide verse nos. 6-8)

(17-22) Six recipes of *saptalā* and *śaṅkhinī* to be prepared in the form of oil; (vide verse nos. 9-11)

(23-30) Eight recipes of *saptalā* and *śaṅkhinī* to be prepared in the form of medicated ghee; (vide verse nos. 12-16)

(31-35) Five recipes of *saptalā* and *śaṅkhinī* to be prepared by fermentation; and (vide verse no. 16-17)

(36-39) Three recipes of *saptalā-śaṅkhinī* to be prepared in the form of linctus and one recipe of *saptalā-śaṅkhinī* to be prepared by adding *kampillaka*. (vide verse no. 16)

For the preparation of the above mentioned recipes, either *saptalā* or *śaṅkhinī* separately or both of these taken together are to be used. [18-19]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढबलसंपूरिते कल्पस्थाने सप्तलाशङ्खिनीकल्पो नामैकादशोध्यायः।।११।।

Thus, ends the eleventh chapter of *Kalpa*-section dealing with the "Pharmaceutics of *Saptalā* and *Śaṅkhinī*" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - XII

द्वादशोऽध्यायः

(PHARMACEUTICS OF DANTĪ AND DRAVANTĪ)

Prologue

अथातो दन्तीद्रवन्तीकल्पं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

We shall now expound the chapter dealing with the "Pharmaceutics of *Dantī* and *Dravantī*."

Thus, said Lord Ātreya. [1-2]

Synonyms

दन्त्युदुम्बरपर्णी स्यान्निकुम्भोऽथ मुकूलकः।
द्रवन्ती नामतश्चित्रा न्यग्रोधी मूषिकाह्वया।।३।।
(तथा मूषिकपर्णी चाप्युपचित्रा च शम्बरी।
प्रत्यक्श्रेणी सुतश्रेणी दन्ती र(च)ण्डा च कीर्तिता।।)

The synonyms of *dantī* are : *udumbara-parṇī, nikumbha* and *mukūlaka*. Synonyms of *dravantī* are : *citrā, nyagrodhī* and *mūṣikāhvayā*. (It is also known as *mūṣika-parṇī, upacitrā, śambarī, pratyak-śreṇī, suta-śreṇī, dantī* and *r(c)aṇḍā*.) [3]

Parts to be Collected

तयोर्मूलानि संगृह्य स्थिराणि बहलानि च।
हस्तिदन्तप्रकाराणि श्यावताम्राणि बुद्धिमान्।।४।।

A wise physician should collect the roots of *dantī* and *dravantī* which are strong, thick (having thick root-bark) and resembling the elephant's tusk. The roots of *dantī* should be dark brown, and those of *dravantī* should be coppery in colour. [4]

The roots of *dantī* and *dravantī* should resemble elephant's tusk, i.e. they should be thick at the top gradually tappering down to the bottom.

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Processing of Dantī and Dravantī

पिप्पलीमधुलिप्तानि स्वेदयेन्मृत्कुशान्तरे।
शोषयेदातपेऽग्न्यर्कौ हतो ह्येषां विकाशिताम्।। ५।।

The roots of *dantī* and *dravantī* should be smeared with the paste (of the powder) of *pippalī* and honey, and covered with *kuśa*. The bundle should then be smeared with mud and fomented with steam. Thereafter, the roots should be taken out and dried in the sun. By the exposure to the heat of the fire and sun, the *vikāśī* attribute (toxic effect which causes looseness of joints) is removed. [5]

Because of the effects of the heat of fire and sun-rays, *dantī* and *dravantī* do not produce much of adverse effects.

Attributes of Dantī and Dravantī

तीक्ष्णोष्णान्याशुकारीणि विकाशीनि गुरूणि च।
विलाययन्ति दोषौ द्वौ मारुतं कोपयन्ति च।। ६।।

The roots of *dantī* and *dravantī* are *tīkṣṇa* (sharp), *uṣṇa* (hot), *āśukārī* (producing effects instantaneously), *vikāśī* (causing looseness of joints) and *guru* (heavy). They cause liquefaction of two *doṣas*, viz., *kapha* and *pitta*. *Vāyu* gets aggravated by these roots. [6]

Recipes of Dantī and Dravantī to be Taken with Yoghurt, etc.

दधितक्रसुरामण्डैः पिण्डमक्षसमं तयोः।
प्रियालकोलबदरपीलुशीधुभिरेव च।। ७।।
पिबेद्गुल्मोदरी दोषैरभिखिन्नश्च यो नरः।

The root of *dantī* and *dravantī* should be made to a paste (by triturating with water). One *akṣa* of this paste should be given to the patient along with the following vehicles :

(1) Yoghurt;

(2) Butter-milk;

(3) *Surā-maṇḍa* (supernatant part of alcohol);

(4) *Priyāla-sīdhu* (a type of wine prepared of *priyāla*);

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(5) *Kola-sīdhu* (another type of wine prepared of *kola* fruit);

(6) *Badara-sīdhu* (another type of wine prepared of *badara*); and

(7) *Pīlu-sīdhu* (another type of wine prepared of *pīlu*).

These recipes are useful for patients suffering from *gulma* (phantom tumour) and *udara* (obstinate abdominal diseases including ascites). These recipes are also useful for those who are overpowered with morbid *doṣas*. [7-$^1/_2$8]

With these seven vehicles, seven recipes of *dantī* and *dravantī* are described in the above text.

Recipes of Dantī and Dravantī to be Taken with Meat-soup

गोमृगाजरसैः पाण्डुः कृमिकोष्ठी भगन्दरी।। ८।।

[One *akṣa* of the paste of *dantī* and *dravantī*] should be taken with the soup of the meat of cow, deer or goat by the patient suffering from *pāṇḍu* (anemia), *kṛmi* (infestation with intestinal parasites) and *bhagandara* (anal fistula). [8$^1/_2$]

With three vehicles, three different recipes of *dantī* and *dravantī* are described in the above text.

Recipes of Dantī and Dravantī in the form of Medicated Ghee, etc.

तयोः कल्के कषाये च दशमूलरसायुते।
कक्ष्यालजीविसर्पेषु दाहे च विपचेद्घृतम्।। ९।।
तैलं मेहे च गुल्मे च सोदावर्ते कफानिले।
चतुःस्नेहं शकृच्छुक्रवातसङ्गानिलार्तिषु।। १०।।

Ghee should be cooked by adding the paste and decoction of *dantī* and *dravantī*, and [equal quantity] of the decoction of *daśa-mūla*. This medicated ghee is useful for patients suffering from *kakṣā* (herpes in the axilla), *alajī* (boils), *visarpa* (erysipelas) and *dāha* (burning syndrome).

With the above mentioned ingredients, oil should be cooked. This medicated oil is useful in *meha* (obstinate

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urinary disorders), *gulma* (phantom tumour) and *udāvarta* (upward movement of wind in the abdomen) caused by the aggravation of *kapha* and *vāyu*.

With the above mentioned ingredients, *catuḥ-sneha* (four types of fat, viz., oil, ghee, muscle-fat and bone-marrow) should be cooked. This recipe of medicated fat is useful in conditions of obstruction of feces, semen and flatus, and other diseases caused by aggravated *vāyu*. [9-10]

Recipes of Dantī and Dravantī in the form of Linctus

रसे दन्त्यजशृङ्ग्योश्च गुडक्षौद्रघृतान्वितः।
लेहः सिद्धो विरेकार्थे दाहसंतापमेहनुत्।। ११।।
वाततर्षे ज्वरे पैत्ते स्यात् स एवाजगन्धया।
दन्तीद्रवन्त्योर्मूलानि पचेदामलकीरसे।। १२।।
त्रींस्तु तस्य कषायस्य भागौ द्वौ फाणितस्य च।
तप्ते सर्पिषि तैले वा भर्जयेत्तत्र चावपेत्।। १३।।
कल्कं दन्तीद्रवन्त्योश्च श्यामादीनां च भागशः।
तत्सिद्धं प्राशयेल्लेहं सुखं तेन विरिच्यते।। १४।।

To the decoction of *dantī* and *aja-śṛṅgī*, jaggery, honey and ghee should be added and cooked. This recipe of linctus should be used for purgation which cures *dāha* (burning syndrome), *santāpa* (heating sensation) and *meha* (obstinate urinary disorders).

In the place of *aja-śṛṅgī* in the above recipe, *aja-gandhā* may be added, and the linctus should be prepared which is useful in morbid thirst caused by *vāyu*, and fever caused by *pitta*.

The root of *dantī* and *dravantī* should be cooked by adding the juice (decoction) of *āmalakī*. Three parts of this decoction should be added with two parts of *phāṇita* (penidium) which should be sizzled by adding hot ghee or hot oil. To this, one part each of the paste of *dantī, dravantī, śyāmā,* [*trivṛt, caturaṅgula, tilvaka, sudhā, saptalā* and *śaṅkhinī*] should be added and cooked. This linctus should be taken as a potion which helps in easy purgation. [11 - 14]

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In the verse no. 40 describing the contents of this chapter, three groups of sixteen recipes are mentioned. The first group of sixteen recipes is described above in the verse nos. 7 to 14.

Second Group of Sixteen Recipes

रसे च दशमूलस्य तथा बैभीतके रसे।
हरीतकीरसे चैव लेहानेवं पचेत् पृथक्।। १५।।
तयोर्बिल्वसमं चूर्णं तद्रसेनेव भावितम्।
असृष्टे विशि वातोत्थे गुल्मे चाम्लयुतं शुभम्।। १६।।
पाटयित्वेक्षुकाण्डं वा कल्केनालिप्य चान्तरा।
स्वेदयित्वा ततः खादेत् सुखं तेन विरिच्यते।। १७।।
मूलं दन्तीद्रवन्त्योश्च सह मुद्गैर्विपाचयेत्।
लाववर्तीरकाद्यैश्च ते रसाः स्युर्विरेचने।। १८।।
तयोर्वाऽपि कषायेण यवागूं जाङ्गलं रसम्।
माषयूषं च संस्कृत्य दद्यात्तैश्च विरिच्यते।। १९।।

(1-3) In the recipe of linctus described in the verse no. 12-14, the decoction of *daśa-mūla* or *vibhītaka* or *harītakī* may be used in the place of the decoction of *āmalakī*, and three other recipes of linctus may be prepared.

(4) One *bilva* of the powder of *dantī* and *dravantī* should be impregnated with the decoction of *dantī* and *dravantī*. This should be taken with the sour juice which is useful in the retention of feces and in *gulma* (phantom tumour) caused by aggravated *vāyu*.

(5) Stem of the sugar-cane should be split, and its inner surface should be smeared with the paste of *dantī* and *dravantī*. Thereafter, the sugar-cane should be fomented. Taking the juice of this sugar-cane by chewing causes easy purgation.

(6-13) The root of *dantī* and *dravantī* along with *mudga* should be cooked with the meat-soup of (1) *lāva*, (2) *vartīraka*, [(3) *vārtīka*, (4) *kapiñjala*, (5) *cakora*, (6) *upacakra*, (7) *kakubha* or (8) *rakta-carmaka*]. These eight medicated soups are useful for purgation.

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(14-15) With the decoction of *dantī* and *dravantī*, gruel (*yavāgū*) or the soup of the meat of animals living in arid zone should be prepared. These two recipes should be sizzled with spices, and administered as potions for purgations.

(16) Similarly, with the decoction of *dantī* and *dravantī*, *yavāgū* (gruel) should be prepared by adding the soup of *māṣa*. This should be sizzled and administered as a potion for purgation.

[15-19]

The second group of sixteen recipes of *dantī* and *dravantī* is described in the above text.

Third Group of Sixteen Recipes

तत्कषायात्त्रयो भागा द्वौ सितायास्तथैव च।
एको गोधूमचूर्णानां कार्या चोत्कारिका शुभा।। २०।।
मोदको वाऽस्य कल्पेन कार्यस्तच्च विरेचनम्।
तयोश्चापि कषायेण मद्यान्यस्योपकल्पयेत्।। २१।।
दन्तीक्वाथेन चालोडच्य दन्तीतैलेन साधितान्।
गुडलावणिकान् भक्ष्यान् विविधान् भक्षयेन्नरः।। २२।।
दन्तीं द्रवन्तीं मरिचं यवानीमुपकुञ्चिकाम्।
नागरं हेमदुग्धां च चित्रकं चेति चूर्णितम्।। २३।।
सप्ताहं भावयेन्मूत्रे गवां पाणितलं ततः।
पिबेद्घृतेन जीर्णे तु विरिक्तश्चापि तर्पणम्।। २४।।
सर्वरोगहरं मुख्यं सर्वेष्वृतुषु यौगिकम्।
चूर्णं तदनपायित्वाद्बालवृद्धेषु पूजितम्।। २५।।
दुर्भक्ताजीर्णपार्श्वार्तिगुल्मप्लीहोदरेषु च।
गण्डमालासु वाते च पाण्डुरोगे च शस्यते।। २६।।
पलं चित्रकदन्त्योश्च हरीतक्याश्च विंशतिः।
त्रिवृत्पिप्पलिकर्षौ द्वौ गुडस्याष्टपलेन तत्।। २७।।
विनीय मोदकान् कुर्याद्दशैकं भक्षयेत्ततः।
उष्णाम्बु च पिबेच्चानु दशमे दशमेऽह्नि च।। २८।।
एते निष्परिहाराः स्युः सर्वरोगनिबर्हणाः।
ग्रहणीपाण्डुरोगार्शःकण्डूकोठानिलापहाः ।। २९।।
दन्तीद्विपलनिर्यूहो द्राक्षार्धप्रस्थसाधितः।
विरेचनं पित्तकासे पाण्डुरोगे च शस्यते।। ३०।।

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दन्तीकल्कं समगुडं शीतवारियुतं पिबेत्।।
विरेचनं मुख्यतमं कामलाहरमुत्तमम्।। ३१।।
श्यामादन्तीरसे गौडः पिप्पलीफलचित्रकैः।
लिप्तेऽरिष्टोऽनिलश्लेष्मप्लीहपाण्डूदरापहः ।। ३२।।
तथा दन्तीद्रवन्त्योश्च कषाये साजगन्धयोः।
गौडः कार्योऽजशृङ्ग्या वा स वै सुखविरेचनः।। ३३।।
तच्चूर्णक्वाथमाषाम्बुकिण्वतोयसमुद्भवा ।
मदिरा कफगुल्माल्पवह्निपार्श्वकटिग्रहे।। ३४।।
अजगन्धाकषायेण सौवीरकतुषोदके।
सुराकम्पिल्लके योगौ लोध्रवच्च तयोः स्मृतौ।। ३५।।

(1) Three parts of the decoction of *dantī* and *dravantī* should be added with two parts of sugar and one part of wheat-flour. With this, *utkārikā* (pan-cake) should be prepared which is useful for purgation.

(2) With the above mentioned ingredients, *modaka* (sweet bolus) may also be prepared and used for purgation.

(3) From the decoction of *dantī* and *dravantī*, wine may be prepared and used for purgation.

(4) Different types of eatables made of jaggery or salt can also be prepared by boiling food ingredients with the decoction or oil of *dantī*. [These eatables may be used for purgation.]

(5) *Dantī, dravantī, marica, yavānī, upakuñcikā, nāgara, hema-dugdhā* and *citraka* should be made to a powder. This should be impregnated with cow's urine for one week. One *pāṇi-tala* of this recipe should be given to the patient along with ghee. After the potion is digested and the patient is purged, he should be given demulcent drink. This recipe is immensely useful for all kinds of diseases. It can be administered in all the seasons. Since it has no untoward effects, it can be safely given to children and old persons. It is useful in loss of appetite, indigestion, pain in the sides of the chest, *gulma* (phantom tumour), splenomegaly, *gaṇḍa-mālā*

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(cervical lymphadenitis), diseases of *vāyu* and anemia.

(6) One *pala* of *citraka*, one *pala* of *dantī*, twenty fruits of *harītakī*, two *karṣas* of *trivṛt* and two *karṣas* of *pippalī* should be added with eight *palas* of jaggery. Out of these ingredients, ten *modakas* (sweet boluses) should be prepared. One of these *modakas* should be taken along with hot water, and this should be repeated every tenth day. No dietetic restriction is necessary while using these *modakas*. These are useful for curing all diseases, specially *grahaṇī* (sprue syndrome), *pāṇḍu-roga* (anemia), *arśas* (piles), *kaṇḍū* (itching), *koṭha* (urticaria) and diseases caused by *vāyu*.

(7) The decoction of two *palas* of *dantī* added with half *prastha* of *drākṣā* is a purgative useful in *kāsa* (cough) caused by *pitta*, and in anemia.

(8) The paste of *dantī* should be added with jaggery in equal quantity and taken as a potion along with cold water. It is an excellent purgative recipe for curing *kāmalā* (jaundice).

(9) The decoction of *śyāmā* and *dantī* should be added with jaggery and kept for fermentation in a jar the inside wall of which is smeared with the paste of *pippalī*, *phala* and *citraka*. This *ariṣṭa* (medicated wine) is useful for ailments caused by *vāyu* and *kapha*, and for diseases like *plīhan* (splenic disorder), anemia and *udara* (obstinate abdominal diseases including ascites).

(10) The decoction of *dantī, dravantī* and *aja-gandhā* should be added with jaggery and made to ferment. [This *ariṣṭa* is useful for purgation.]

(11) In the above recipe, *aja-śṛṅgī* may be added in the place of *aja-gandhā*. This *ariṣṭa* helps in easy purgation.

(12) The decoction of the powder of *dantī* and *dravantī*

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should be added with the decoction of *māṣa* and made to ferment. From out of this fermented (*kiṇva*) wine, alcohol (*madirā*) should be extracted which is useful in *gulma* (phantom tumour) caused by *kapha*, suppression of the power of digestion and stiffness of the sides of the chest and the waist.

(13-14) With the decoction of *dantī*, *dravantī* and *ajagandhā*, *sauvīraka* (vinegar) and *tuṣodaka* (a type of sour drink) should be prepared on the lines suggested for *lodhra* (vide *Kalpa* 9 : 7). [These two recipes are useful for purgation.]

(15) With the decoction of *dantī* and *dravantī*, *surā* (alcoholic drink) should be prepared on the lines suggested for *lodhra* (vide *Kalpa* 9 : 8-10). [This is useful for purgation.]

(16) *Dantī* and *dravantī* should be added with *kampillaka*, and the recipe should be prepared on the line suggested for *lodhra* (vide *Kalpa* 9 : 10-11). [This recipe is useful for purgation.]

[20-35]

In the above text, the third group of sixteen recipes is described. The sixth recipe described above is also called *Agastya-modaka.*

Contents (up to this Portion) of Chapter

तत्र श्लोकाः-

(दध्यादिषु त्रयः पञ्च प्रियालाद्यैस्त्रयो रसे।
स्नेहेषु वै त्रयो लेह्याः षट् चूर्णे त्वेक एव च।। ३६।।
इक्षावेकस्तथा मुद्गमांसानां च रसास्त्रयः।
यवाग्वादौ त्रयश्चैव उक्त उत्कारिकाविधौ।। ३७।।
एकश्च मोदके मद्ये चैकस्तत्क्वाथतैलके।
चूर्णमेकं पुनश्चैको मोदकः पञ्च चासवे।। ३८।।
एकः सौवीरकेऽथैको योगः स्यात्तु तुषोदके।
एका सुरैकः कम्पिल्ले तथा पञ्च घृते स्मृताः।। ३९।।)

To sum up :

In this (up to this portion of the) chapter, the following recipes of *dantī* and *dravantī* are described :

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(1-3) Three recipes to be prepared with *dadhi* or yoghurt, etc.;
(vide verse nos. 7-8)

(4-7) Four recipes to be prepared with *priyāla*, etc.;
(vide verse nos. 7-8)

(8-10) Three recipes to be prepared in the form of meat-soup;
(vide verse no. 8)

(11-13) Three recipes to be prepared in the form of medicated fat;
(vide verse nos. 9-10)

(14-19) Six recipes to be prepared in the form of linctus;
(vide verse nos. 11-15)

(20) One recipe to be prepared in the form of powder;
(vide verse no. 16)

(21) One recipe to be prepared with sugar-cane;
(vide verse no. 17)

(22-29) Eight recipes to be prepared with the soup of *mudga* and meat-soups; (*'rasāstrayaḥ'* in the text appears to be an error).
(vide verse no. 18)

(30-32) Three recipes to be prepared in the form of *yavāgū*, etc.;
(vide verse no. 19)

(33) One recipe in the form of *utkārikā*;
(vide verse no. 20)

(34) One recipe in the form of *modaka* (sweet bolus);
(vide verse no. 21)

(35) One recipe in the form of alcoholic drink;
(vide verse no. 21)

(36) One recipe of eatables to be prepared with the decoction and oil of *dantī* and *dravantī*;
(vide verse no. 22)

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(37) One recipe in powder form;
(vide verse nos. 23-26)

(38) One recipe again in the form of *modaka*;
(vide verse nos. 27-29)

(39-44) Six recipes in the form of *āsava* (medicated wine);
(vide verse nos. 30-34) ["*pañca cāsave*" appears to be an error]

(45) One recipe in the form of *sauvīraka* (vinegar);
(vide verse no. 35)

(46) One recipe in the form of *tuṣodaka* (sour drink prepared of husked paddy);
(vide verse no. 35)

(47) One recipe in the form of *surā* (alcohol);
(vide verse no. 35)

(48) One recipe to be prepared along with *kampillaka*; and
(vide verse no. 35)

(49) Five recipes to be prepared in the form of medicated ghee.

["*Pañca ghṛte smṛtāḥ*" in the text appears to be an error because such five recipes of medicated ghee are not found in the text. Only three recipes of medicated fat are described in verse nos. 9-10 which are already enumerated in item nos. 11-13 above.] [36-39]

[The above mentioned verses appear to be subsequent interpolations, and Cakrapāṇi has not commented on the above text. Different categories of the above mentioned recipes are differently explained by other commentators. However, in the translation and interpretation, those furnished by Cakrapāṇi in the earlier text have been followed.]

Summary of Contents

दन्तीद्रवन्तीकल्पेऽस्मिन् प्रोक्ताः षोडशकास्त्रयः।

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नानाविधानां योगानां भक्तिदोषामयान्प्रति।। ४०।।

In this chapter dealing with the "Pharmaceutics of *Dantī* and *Dravantī*", three groups each containing sixteen recipes, have been described to suit the likings of the patient, *doṣas* aggravated and diseases to be treated. [40]

Summary of Kalpa-section

त्रिशतं पञ्चपञ्चाशद्योगानां वमने स्मृतम्।
द्वे शते नवकाः पञ्च योगानां तु विरेचने।। ४१।।
ऊर्ध्वानुलोमभागानामित्युक्तानि शतानि षट्।
प्राधान्यतः समाश्रित्य द्रव्याणि दश पञ्च च।। ४२।।

In this *Kalpa*-section, 355 recipes for emesis and 245 recipes for purgation, thus taken together six hundred in total, are described for the purification of the body (by elimination of *doṣas*) through upward and downward tracts. These recipes are mainly composed of fifteen drugs. [41-42]

Fifteen basic drugs composing the six hundred recipes described in this section are (1) *Madana-phala,* (2) *jīmūtaka*, (3) *ikṣvāku,* (4) *dhāmārgava,* (5) *kuṭaja,* (6) *kṛtavedhana,* (7) *śyāmā*, (8) *trivṛt,* (9) *caturaṅgula*, (10) *tilvaka,* (11) *mahā-vṛkṣa* (*sudhā*), (12) *saptalā*, (13) *śaṅkhinī,* (14) *dantī* and (15) *dravantī* (vide *Kalpa* 1 : 6).

Recapitulation

भवन्ति चात्र–
यद्धि येन प्रधानेन द्रव्यं समुपसृज्यते।
तत्संज्ञकः स योगो वै भवतीति विनिश्चयः।। ४३।।
फलादीनां प्रधानानां गुणभूताः सुरादयः।
ते हि तान्यनुवर्तन्ते मनुजेन्द्रमिवेतरे।। ४४।।

Thus it is said :

The recipes are invariably named after the principal (most active) drugs used in their composition.

Alcohol, etc., used along with the principal ingredients like *madana-phala*, etc., play a secondary role. Their effects follow the attributes of the principal ingredients used in the recipe as the attendants follow the king. [43-44]

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In different recipes, alcohol, etc., are added as constituents, vehicles or expicients to the main drugs like *madana-phala*. In these recipes, *madana-phala*, etc., are the main ingredients, and alcohol, etc., play only a secondary role. Therefore, these recipes are named after the principal ingredients, and not after the ingredients having secondary therapeutic value. These ingredients like alcohol, however, follow the effects of the principal drugs used in the recipe.

Similarity or Dissimilarity of Potency

विरुद्धवीर्यमप्येषां प्रधानानामबाधकम्।
अधिकं तुल्यवीर्ये हि क्रियासामर्थ्यमिष्यते।। ४५।।

Sometimes the drugs of secondary nature have antagonistic potency. Even then they do not contradict the effects of the principal drug. If these drugs of secondary nature are similar in potency as that of the principal drugs, then the recipe becomes all the more effective therapeutically. [45]

Principal drugs like *dantī*, etc., have strong action, and meat-soup, etc., added to the recipes of *dantī* are mild in action. *Elā*, etc., are cardiac tonics. When added to emetic drugs, like *madana,* they are likely to reduce the emetic effect. Combination of these drugs having opposite potency, however, does not affect the effects of the principal ingredient. On the other hand, notwithstanding their opposite potency, they actually help emetic and purgative effects of the principal ingredient.

If the drugs of secondary nature have the potency similar to that of the principal drug, then obviously the effect of the compound recipe becomes all the more potent.

Need for Using Drugs of Dissimilar Potency

इष्टवर्णरसस्पर्शगन्धार्थं प्रति चामयम्।
अतो विरुद्धवीर्याणां प्रयोग इति निश्चितम्।। ४६।।

Drugs of antagonistic potency are added to a recipe in order to impart desirable colour, taste, touch and smell. Such addition also helps to effectively cure the diseases. [46]

Emetic and purgative recipes (therapies) are administered for the treatment of several diseases. But the disease cannot be fully cured simply by emesis or purgation. Therefore, in emetic and purgative

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recipes, some other drugs, even those having opposite potencies, are added so that the recipe as a whole becomes effective to cure the disease.

Need for Impregnation

भूयश्चैषां बलाधानं कार्यं स्वरसभावनैः।
सुभावितं ह्यल्पमपि द्रव्यं स्याद्बहुकर्मकृत्।। ४७।।
स्वरसैस्तुल्यवीर्यैर्वा तस्माद्द्रव्याणि भावयेत्।

In addition to adding to the potency of the recipe, it is necessary to impregnate the ingredients of a recipe with the juice or decoction of other drugs. When properly impregnated, even a small quantity of the drug becomes exceedingly effective. Therefore, ingredients of a recipe should be impregnated with the juice or decoction of other ingredients having identical potency. [47 - $^{1}/_{2}$ 48]

Modification of Effects of Recipe

अल्पस्यापि महार्थत्वं प्रभूतस्याल्पकर्मताम्।। ४८।।
कुर्यात् संयोगविश्लेषकालसंस्कारयुक्तिभिः।

By virtue of appropriate *saṃyoga* (addition of ingredients), *viśleṣa* (elimination of ingredients), *kāla* (appropriate time of administration) and *saṃskāra* (processing) even a small quantity of a drug may produce more powerful effects, and otherwise even a recipe in large quantity may produce very mild effects. [48$^{1}/_{2}$ - $^{1}/_{2}$ 49]

If a drug is added with ingredients having identical potency, then the effect of the recipe taken even in small quantity becomes more powerful. Similarly, if a drug is added with ingredients having opposite potency then the effect of the recipe taken even in large quantity becomes milder. In certain cases, the milder effect of the recipe is necessary in order to make it suitable to the requirement of the nature of *koṣṭha* (nature of bowel).

In the same way, the effects of *viśleṣa* (elimination of ingredients), *kāla* (time of administration) and *saṃskāra* (processing) can be explained and illustrated.

Innumerability of Recipes

प्रदेशमात्रमेतावद्वृष्टव्यमिह षट्शतम्।। ४९।।

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स्वबुद्धचैवं सहस्राणि कोटीर्वाऽपि प्रकल्पयेत्।
बहुद्रव्यविकल्पत्वाद्योगसंख्या न विद्यते।। ५०।।

Six hundred recipes for emesis and purgation, described in this section, are only a fraction of the total number of such recipes. The physician, according to his own wisdom, may prepare thousands and billions of such recipes because the permutation and combination of ingredients are innumerable. Therefore, there is no limit to these recipes. [$49^1/_2$ - 50]

Three Categories of Recipes

तीक्ष्णमध्यमृदूनां तु तेषां शृणुत लक्षणम्।

Recipes for emesis and purgation are of three categories, viz., *tīkṣṇa* (strong or sharp), *madhya* (moderate) and *mṛdu* (mild). Their characteristic features will be described which you may listen to (addressed to the disciple Agniveśa).

[$^1/_2$51]

Characteristics of Tīkṣṇa Recipe

सुखं क्षिप्रं महावेगमसक्तं यत् प्रवर्तते।। ५१।।
नातिग्लानिकरं पायौ हृदये न च रुक्करम्।
अन्तराशयमक्षिण्वन् कृत्स्नं दोषं निरस्यति।। ५२।।
विरेचनं निरूहो वा तत्तीक्ष्णमिति निर्दिशेत्।

Strong type of recipe for emesis, purgation as well as *nirūha* type of enema has the following characteristics :

(1) It causes purgation and emesis easily, quickly and with strong force;

(2) The morbid material does not get adhered to the gastro-intestinal tract;

(3) It does not cause excessive fatigue of the anal region;

(4) It does not cause pain in the cardiac region;

(5) It does not cause any erosion in the gastro-intestinal tract; and

(6) It eliminates the morbid material in its entirety.

[$51^1/_2$ - $^1/_2$ 53]

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The term '*virecana*' used in the above text generally means 'purgation'. In the present context, however, it implies both purgation as well as emesis (vide *Kalpa* 1 : 4).

Factors Responsible for Making a Recipe Strong

जलाग्निकीटैरस्पृष्टं देशकालगुणान्वितम्।। ५३।।
ईषन्मात्राधिकैर्युक्तं तुल्यवीर्यैः सुभावितम्।
स्नेहस्वेदोपपन्नस्य तीक्ष्णत्वं याति भेषजम्।। ५४।।

The following factors are responsible for increasing the strength of a recipe :

(1) The ingredients are not impaired by exposure to water, fire and insects;

(2) The ingredients are imbibed with the beneficial attributes of the soil and season;

(3) The recipe is administered in a slightly higher dose;

(4) The ingredients are appropriately impregnated with drugs having similar potency; and

(5) The patient is administered oleation and fomentation therapies. [$53^1/_2$ - 54]

Characteristics of Madhya (Moderate) Type of Recipe

किंचिदेभिर्गुणैर्हीनं पूर्वोक्तैर्मात्रया तथा।
स्निग्धस्विन्नस्य वा सम्यङ्मध्यं भवति भेषजम्।। ५५।।

Recipes having ingredients which are slightly inferior in the above mentioned characteristics, and administered in a lesser dose to a person who has undergone oleation and fomentation therapies appropriately produce moderate effect. [55]

Characteristics of Recipes Having Mṛdu (Mild) Effect

मन्दवीर्यं विरूक्षस्य हीनमात्रं तु भेषजम्।
अतुल्यवीर्यैः संयुक्तं मृदु स्यान्मन्दवेगवत्।। ५६।।

Recipes are categorised as mild (*mṛdu*) when they cause slow urge [of emesis and purgation] because of the following :

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(1) The ingredients are of low potency;

(2) The ingredients are of contradictory potencies;

(3) The recipe is administered in small dose; and

(4) The recipe is administered to a patient who has ununctuousness (i.e. has not been properly oleated). [56]

Suitability of Different Categories of Recipes for Different Types of Patients

अकृत्स्नदोषहरणादशुद्धी ते बलीयसाम्।
मध्यावरबलानां तु प्रयोज्ये सिद्धिमिच्छता।। ५७।।

Recipes of moderate and mild categories do not cause purification of a patient with strongly aggravated *doṣas* as these are too mild to eliminate morbid matter (*doṣas*) in its entirety.

A physician desirous of professional success should administer such therapies only to patients with moderately or mildly aggravated *doṣas*. [57]

Recipes of mild and moderate nature do not cause appropriate purification of a strong person as they are incapable of eliminating *doṣas* of his body in their entirety. These mild and moderate recipes may, however, cause purification of a person with mild and moderate strength respectively because in such cases complete purification by these recipes is possible.

Selection of Recipes for Different Categories of Diseases

तीक्ष्णो मध्यो मृदुर्व्याधिः सर्वमध्याल्पलक्षणः।
तीक्ष्णादीनि बलावेक्षी भेषजान्येषु योजयेत्।। ५८।।

Strong, moderate and mild diseases are characterised by the manifestation of all the symptoms; manifestaion of only some symptoms which are of moderate nature, and manifestation of only some symptoms which are of mild nature respectively. For such strong, moderate and mild diseases, therapies of strong, moderate and mild nature are to

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be used respectively provided the patient is strong, of moderate strength, or of mild strength. [The patient who is strong should be given strong therapy, the one who is of moderate strength should be given moderate therapy, and the patient who is of mild strength should be given mild therapy.][58]

In the selection of a therapy, the following points should be kept in view :

(1) The nature of the recipe;

(2) The strength of the patient; and

(3) The seriousness of the disease.

Repeated Use of Therapy

देयं त्वनिर्हृते पूर्वं पीते पश्चात् पुनः पुनः।
भेषजं वमनार्थीयं प्राय आपित्तदर्शनात्।। ५९।।

If by the administration of the emetic recipe, the morbid material (*doṣa*) is not eliminated [completely], then it (same recipe) should be administered again and again (to the patient) till there is appearance of bile (in the vomited material). [59]

The sign of proper emesis is the appearance of bile along with the vomited material at the end (vide *Siddhi* 1 : 14). Therefore, if there is improper emesis, the emetic recipe should be administered again and again till bile appears in the vomited material.

Exceptions to this General Rule

बलत्रैविध्यमालक्ष्य दोषाणामातुरस्य च।
पुनः प्रदद्याद् भैषज्यं सर्वशो वा विवर्जयेत्।। ६०।।

After ascertaining three different types of the strength of the *doṣas* (morbid material) and that of the patient, the recipes (of appropriate category) should be administered repeatedly. However, if the patient is weak and the disease is of mild nature, then the therapy may be avoided altogether. [60]

If the patient is of moderate strength, and if the disease is of moderate nature then complete avoidance of the therapy is not necessary. such a patient can be administered the therapy (moderately) in the

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beginning. But in such cases even if the *doṣa* (morbid material) is not completely eliminated, the repetition of the therapy should be avoided, as stated above.

Administration of Another Recipe

निर्हृते वाऽपि जीर्णे वा दोषनिर्हरणे बुधः।
भेषजेऽन्यत्प्रयुञ्जीत प्रार्थयन्सिद्धिमुत्तमाम्।। ६१।।

If the recipe administered for elimination of *doṣas* itself gets eliminated or gets digested (without eliminating the *doṣa*), then another recipe should be administered to the patient by a wise physician desirous of professional success. [61]

If without causing vomiting and without eliminating *doṣas*, the recipe gets eliminated or becomes digested, then there will be no stimulation of the urge for vomiting. It is only the undigested recipe which provides such stimulation for the urge for vomiting. In such a case, on the same day, another (a different) recipe for emesis should be administered.

Necessity to Prevent Digestion of Emetic Recipe

अपक्वं वमनं दोषं पच्यमानं विरेचनम्।
निर्हरिद्वमनस्यातः पाकं न प्रतिपालयेत्।। ६२।।

An emetic recipe produces emesis only when it is not digested. A purgative recipe causes purgation during the process of its digestion. Therefore, the physician should not lose any time after the recipe is digested [and administer another recipe immediately]. [62]

Digestion of Purgative Recipe

पीते प्रस्रंसने दोषान्न निर्हृत्य जरां गते।
वमिते चौषधे धीरः पाययेदौषधं पुनः।। ६३।।

If a purgative recipe itself gets digested or gets eliminated by vomiting without eliminating the *doṣa* (morbid material), [even] then an intelligent physician should administer the purgative recipe again (on the same day).

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Repetition of Therapy for Strong and Weak Patients

दीप्ताग्निं बहुदोषं तु दृढस्नेहगुणं नरम्।
दुःशुद्धं तदहर्भुक्तं श्वोभूते पाययेत् पुनः।। ६४।।
दुर्बलो बहुदोषश्च दोषपाकेन यो नरः।
विरिच्यते शनैर्भोज्यैर्भूयस्तमनुसारयेत्।। ६५।।

If a person who has strong power of digestion, who has more of aggravated *doṣas* and whose body is strongly unctuous, is not fully cleansed of morbid material, then he may be given food on that day, and on the second day, he should be given purgative therapy again.

If a weak patient has aggravated *doṣas* (morbid material) in large quantity, and his *doṣas* have developed the tendency to undergo *pāka* (metabolic transformation) leading to purgation, then only giving him food (which causes downward movement of wind in the colon) will again help in slow purgation. [64-65]

If there is already a tendency of the morbid *doṣas* to move downwards because of *pāka* (metabolic transformation), then purgative recipe should not be given again because it may lead to *ati-yoga* (excessive purgation).

Treatment of Residual Doṣas

वमनैश्च विरेकैश्च विशुद्धस्याप्रमाणतः।
भोजनान्तरपानाभ्यां दोषशेषं शमं नयेत्।। ६६।।

If a person is not fully cleansed by emesis or purgation, then the residual *doṣas* (morbid material) may be alleviated by the appropriate diet like gruel and *antara-pāna* (decoctions of drugs) which stimulate the power of digestion. [66]

The terms "*vamanaiḥ... virekaiḥ..*" are used in plural because even one recipe causes multiple bouts of vomiting and purgation.

In the place of '*viśuddhasya-apramāṇataḥ*' there is a variant reading '*viśuddhasya pramāṇataḥ*". According to those who accept this latter reading as authentic, even when there is appropriate emesis and purgation, the patient should be given suitable diet and drinks which stimulate the power of digestion for alleviating the residual *doṣas* adhered to the walls of the gastro-intestinal tract.

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Persons to be Given Mild Recipe

दुर्बलं शोधितं पूर्वमल्पदोषं च मानवम्।
अपरिज्ञातकोष्ठं च पाययेतौषधं मृदु।। ६७।।

Persons who are weak, who have undergone the process of purification earlier, who have less of aggravated *doṣas* and whose bowel-condition is not known should be given purificatory recipe of mild nature. [67]

Those who have undergone the process of purification earlier become physically weak. To them only mild recipe is to be administered. If strong recipe is administered to such weak persons, then they lose their strength exceedingly.

Preference for Milder Recipes

श्रेयो मृद्वसकृत्पीतमल्पबाधं निरत्ययम्।
न चातितीक्ष्णं यत् क्षिप्रं जनयेत्प्राणसंशयम्।। ६८।।

Mild recipes are attended with less of discomfort and do not involve any risk. Therefore, it is better to take such mild recipes if required even frequently than strong recipes which may cause immediate danger to life. [68]

Recipes of very strong nature should never be given to weak patients because these may endanger their lives.

Essentiality of Purification

दुर्बलोऽपि महादोषो विरेच्यो बहुशोऽल्पशः।
मृदुभिर्भेषजैर्दोषा हन्युर्ह्यनमनिर्हृताः।। ६९।।

If the *doṣas* are excessively aggravated then even a weak person should be given elimination therapies. However, such therapies should be administered in small *doses*, but very frequently with the ingredients having mild effects. If the *doṣas* are not eliminated, then these may cause death of the patient. [69]

Emetic Effects of Purgative Drugs

यस्योर्ध्वं कफसंसृष्टं पीतं यात्यानुलोमिकम्।
वमितं कवलैः शुद्धं लङ्घितं पाययेत्तु तम्।। ७०।।

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A purgative recipe may get mixed up with *kapha* and move upwards. This may cause vomiting. To such patients emetic therapy and *kavala* (gargling therapy) should be administered for the elimination of (lit. purification) [of *kapha*]. He should be made to fast, and thereafter, the purgative potion should be given to him. [70]

Management of Complications

विबद्धेऽल्पे चिराद्दोषे स्रवत्युष्णं पिबेज्जलम्।
तेनाध्मानं तृषा च्छर्दिर्विबन्धश्चैव शाम्यति।। ७१।।
भेषजं दोषरुद्धं चेन्नोर्ध्वं बाधः प्रवर्तते।
सोद्गारं साङ्गशूलं च स्वेदं तत्रावचारयेत्।। ७२।।

If the morbid *doṣas* get obstructed or get eliminated in small quantities or get eliminated after a long time, then hot water should be given to the patient to drink. [Apart from correcting the above mentioned defects], it relieves flatulence, morbid thirst, vomiting and constipation.

At times, the medicine gets obstructed by morbid *doṣas* and moves neither upwards nor downwards. Such a condition gets associated with eructations and bodyache. In such cases, fomentation therapy should be administered. [71-72]

Elimination of Residual Medicaments

सुविरिक्ते तु सोद्गारमाश्वेवौषधमुल्लिखेत्।
अतिप्रवर्तनं जीर्णे सुशीतैः स्तम्भयेद्भिषक्।। ७३।।

If a person who has been well purged continues to have eructations, the residual medicament inside the gastro-intestinal tract should be eliminated by emesis. If after the digestion of the recipe, there is excess of purgation, then it should be stopped by excessively cooling ingredients. [73]

Even if the morbid *doṣas* are properly eliminated from the body, occurence of eructations indicates that a part of the recipe is still in the process of digestion. This residual medicament should be taken out by emetic therapy on the same day.

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If a part of the recipe is not digested then it may cause excessive purgation which has to be arrested by excessively cooling ingredients.

Delayed Action

कदाचिच्छ्लेष्मणा रुद्धं तिष्ठत्युरसि भेषजम्।
क्षीणे श्लेष्मणि सायाह्ने रात्रौ वा तत्प्रवर्तते।। ७४।।

At times, the recipe being obstructed by *kapha* remains in the chest (oesophagus). It produces its effects when *kapha* gets diminished either in the evening or at night. [74]

If the recipe does not produce its effects because of its obstruction in the chest by *kapha*, then it is necessary for the physician to await its action when naturally *kapha* is reduced in the evening or at night.

Repetition of Dose

रूक्षानाहारयोर्जीर्णे विष्टभ्योर्ध्वं गतेऽपि वा।
वायुना भेषजे त्वन्यत् सस्नेहलवणं पिबेत्।। ७५।।

If because of ununctuousness of fasting, medicine gets digested or if because of aggravated *vāyu*, it moves upwards along with flatulence, then another dose of the recipe should be given to the patient along with unctuous ingredients and salt. [75]

Use of Pitta-alleviating Medicines

तृण्मोहभ्रममूर्च्छायाः स्युश्चेज्जीर्यति भेषजे।
पित्तघ्नं स्वादु शीतं च भेषजं तत्र शस्यते।। ७६।।

If during the digestion of medicines there is morbid thirst, stupor, giddiness or fainting, then *pitta*-alleviating medicines which are sweet and cooling should be given. [76]

Use of Kapha-alleviating Medicines

लालाहल्लासविष्टम्भलोमहर्षाः कफावृते।
भेषजं तत्र तीक्ष्णोष्णं कट्वादि कफनुद्धितम्।। ७७।।

If there is salivation, nausea, intestinal stasis and horripilation because of the medicament getting covered up

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by *kapha*, then the patient should be given *kapha*-alleviating drugs which are *tīkṣṇa* (sharp), hot, pungent, etc.

Fasting Therapy

सुस्निग्धं क्रूरकोष्ठं च लङ्घयेदविरेचितम्।
तेनास्य स्नेहजः श्लेष्मा सङ्गश्चैवोपशाम्यति।। ७८।।

If there is no purgation even after the patient has undergone appropriate oleation therapy because of *krūra-koṣṭha* (costive bowel), then the patient should be made to fast. As a result of this, his *kapha* aggravated by oleation therapy and its adherance to the body get alleviated. [78]

Digestion of Recipe

रूक्ष-बह्वनिल-क्रूरकोष्ठ-व्यायामशालिनाम्।
दीप्ताग्नीनां च भैषज्यमविरिच्यैव जीर्यति।। ७९।।
तेभ्यो बस्तिं पुरा दत्त्वा पश्चाद्दद्याद्विरेचनम्।
बस्तिप्रवर्तितं दोषं हरेच्छीघ्रं विरेचनम्।। ८०।।

Because of ununctuousness of the body, aggravation of *vāyu, krūra-koṣṭha* (costive nature of the bowel), habitual exercise and strong power of digestion, a recipe may get digested without causing purgation.

To such patients, medicated enema should be given prior to the administration of purgation therapy. By this medicated enema, the morbid *doṣas* get excited and the recipe of purgation eliminates the morbid *doṣas* quickly. [79-80]

According to some scholars, the *basti* (medicated enema) referred to above should be of *anuvāsana* type. *Nirūha* type of medicated enema, according to them, should not be given "because it aggravates *vāyu*" (vide *Siddhi* 4 : 50). They also advance the argument that *nirūha* type of medicated enema is specifically mentioned to be given only after a gap of seven days after purgation therapy (vide *Siddhi* 1 : 26). But this view is not correct. The term '*basti*' referred to above implies both *anuvāsana* and *nirūha* types. *Nirūha* does aggravate *vāyu* if it is given alone for a long time without *anuvāsana* type of enema. In general, both the types of enema cause alleviation of *vāyu* (vide *Sūtra* 25 : 40). Prohibition of purgation after *nirūha* type of enema is a general

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statement. But in special circumstances, as stated above such exceptions are possible.

In the above text purgation is stated to be given after enema therapy. As stated in *Siddhi* 1 : 26, there may be a gap of seven days. Therefore, there is no contradiction in the statements.

Persons Unsuitable for Elimination Therapy

रूक्षाशनाः कर्मनित्या ये नरा दीप्तपावकाः।
तेषां दोषाः क्षयं यान्ति कर्मवातातपाग्निभिः।। ८१।।
विरुद्धाध्यशनाजीर्णदोषानपि सहन्ति ते।
स्नेह्यास्ते मारुताद्रक्ष्या नाव्याधौ तान् विशोधयेत्।। ८२।।

In persons who indulge in ununctuous food, who are accustomed to physical exercise and whose power of digestion is very strong, the aggravated *doṣas* get diminished by the influence of exercise and exposure to wind, sun as well as fire. They are capable of tolerating the effects of antagonistic diet, intake of food before the previous meal is digested and indigestion. Such patients should be given oleation therapy, and should be protected from the aggravation of *vāyu*. They should not be given purgation therapy unless they are affected by a (serious) disease. [81-82]

Unctuous and Ununctuous Types of Purgation

नातिस्निग्धशरीराय दद्यात् स्नेहविरेचनम्।
स्नेहोत्क्लिष्टशरीराय रूक्षं दद्याद्विरेचनम्।। ८३।।

Unctuous type of purgation therapy should not be given to a person whose body is excessively unctuous. To the person whose body is saturated with unctuousness, a non-unctuous type of purgation should be given. [83]

Appropriate Administration of Purgation Therapy

एवं ज्ञात्वा विधिं धीरो देशकालप्रमाणवित्।
विरेचनं विरेच्येभ्यः प्रयच्छन्नापराध्यति।। ८४।।

A wise physician who is acquainted with the above mentioned procedure (for the administration of purgation

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including emetic therapies), and who is well-versed with the nature of the land, seasons and dosage, does not commit errors in the administration of purgation including emetic therapies to persons for whom these therapies are indicated. [84]

Proper Administration of Therapies

विभ्रंशो विषवद्यस्य सम्यग्योगो यथाऽमृतम्।
कालेष्ववश्यं पेयं च तस्माद्यत्नात् प्रयोजयेत्।। ८५।।

Purgation including emetic therapies work like poison if inappropriately administered. If properly administered, these work like ambrosia.

It is essential to administer these therapies at the time of need. Therefore, these therapies are to be administered carefully. [85]

For the treatment of diseases which are curable by purgation and emetic therapies, such therapies should be administered. These therapies must not be avoided simply because of the risk involved.

Dosage

द्रव्यप्रमाणं तु यदुक्तमस्मिन्मध्येषु तत् कोष्ठवयोबलेषु।
तन्मूलमालम्ब्य भवेद्विकल्प्यं तेषां विकल्प्योऽभ्यधिकोनभावः।। ८६।।

The dosage of recipes described in this section is with reference to persons having moderate type of *koṣṭha* (nature of bowel movement), age and strength. Keeping this standard in view, changes in the dosage could be done either by its increase or decrease. [86]

Table of Weights and Measures

षड् ध्वंश्यस्तु मरीचिः स्यात् षण्मरीच्यस्तु सर्षपः।
अष्टौ ते सर्षपा रक्तास्तण्डुलश्चापि तद्द्वयम्।। ८७।।
धान्यमाषो भवेदेको धान्यमाषद्वयं यवः।
अण्डिका ते तु चत्वारस्ताश्चतस्रस्तु माषकः।। ८८।।
हेमश्च धान्यकश्चोक्तो भवेच्छाणस्तु ते त्रयः।
शाणौ द्वौ द्रङ्क्षणं विद्यात् कोलं बदरमेव च।। ८९।।
विद्याद्द्वौ द्रङ्क्षणौ कर्षं सुवर्णं चाक्षमेव च।

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विडालपदकं चैव पिचुं पाणितलं तथा।।९०।।
तिन्दुकं च विजानीयात् कवलग्रहमेव च।
द्वे सुवर्णे पलार्धं स्याच्छुक्तिरष्टमिका तथा।।९१।।
द्वे पलार्धे पलं मुष्टिः प्रकुञ्चोऽथ चतुर्थिका।
बिल्वं षोडशिका चाम्रं द्वे पले प्रसृतं विदुः।।९२।।
अष्टमानं तु विज्ञेयं कुडवौ द्वौ तु मानिका।
पलं चतुर्गुणं विद्यादञ्जलिं कुडवं तथा।।९३।।
चत्वारः कुडवाः प्रस्थश्चतुःप्रस्थमथाढकम्।
पात्रं तदेव विज्ञेयं कंसः प्रस्थाष्टकं तथा।।९४।।
कंसश्चतुर्गुणो द्रोणश्चार्मणं नल्वणं च तत्।
स एव कलशः ख्यातो घटमुन्मानमेव च।।९५।।
द्रोणस्तु द्विगुणः शूर्पो विज्ञेयः कुम्भ एव च।
गोणीं शूर्पद्वयं विद्यात् खारीं भारं तथैव च।।९६।।
द्वात्रिंशतं विजानीयाद्वाहं शूर्पाणि बुद्धिमान्।
तुलां शतपलं विद्यात् परिमाणविशारदः।।९७।।
शुष्कद्रव्येष्विदं मानमेवमादि प्रकीर्तितम्।

The table of weights and measures used in Āyurveda is as follows :

(The basic weight is *dhvaṃśī* which is also called *trasareṇu*. According to some physicians, it is also called *dhūli* or a floating dust particle.)

(A) 6 *dhvaṃśīs* make one *marīci;*

(B) 6 *marīcis* make one (*rakta*) *sarṣapa* (lit. red mustard seed);

(C) 8 *rakta-sarṣapas* make one *taṇḍula* (lit. grain of rice);

(D) 2 *taṇḍulas* make one *dhānya-māṣa* (lit. black gram);

(E) 2 *dhānya-māṣas* make one *yava* (lit. grain of barley);

(F) 4 *yavas* make one *aṇḍikā*;

(G) 4 *aṇḍikās* make one *māṣaka* (*māṣa*); [It is equivalent to 1 gram]; Its synonyms are *hema* and *dhānyaka*;

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(H) 3 *māṣas* make one *śāṇa*; (It is equivalent to 3 grams);

(I) 2 *śāṇas* make one *drańkṣaṇa*; (It is equivalent to 6 grams); Its synonyms are *kola* and *badara*;

(J) 2 *drańkṣaṇas* make one *karṣa*; (It is equivalent to 12 grams); Its synonyms are *suvarṇa, akṣa, biḍāla-padaka, picu, pāṇi-tala, tinduka* and *kavala-graha*;

(K) 2 *suvarṇas* (*karṣas*) make one *palārdha*, i.e. half *pala*; (It is equivalent to 24 grams; Its synonyms are *śukti* and *aṣṭamikā*;

(L) 2 *palārdhas* make one *pala*; (It is equivalent to 48 grams); Its synonyms are *muṣṭi, prakuñca, caturthikā, bilva, ṣoḍaṣikā* and *āmra*;

(M) 2 *palas* make one *prasṛta*; (It is equivalent to 96 grams); Its synonym is *aṣṭamāna;*

(N) 4 *palas* make one *añjali;* (It is equivalent to 192 grams); Its synonym is *kuḍava*;

(O) 2 *kuḍavas* make one *mānikā*; (It is equivalent to 384 grams);

(P) 4 *kuḍavas* make one *prastha;* (It is equivalent to 768 grams);

(Q) 4 *prasthas* make one *āḍhaka*; (It is equivalent to 3.072 kilograms); Its synonym is *pātra*;

(R) 2 *aḍhakas* (8 *prasthas*) make one *kaṃsa*; (It is equivalent to 6.144 kilograms);

(S) 4 *kaṃsas* make one *droṇa*; (It is equivalent to 24.576 kilograms); Its synonyms are *armaṇa, nalvaṇa, kalaśa, ghaṭa* and *unmāna*;

(T) 2 *droṇas* make one *śūrpa*; (It is equivalen to 49.152 kilograms); Its synonym is *kumbha*;

(U) 2 *śūrpas* make one *goṇī*; (It is equivalent to 98.304 kilograms); Its synonyms are *khārī* and *bhāra*;

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(V) 32 *śūrpas* make one *vāha*; (It is equivalent to 1572.864 kilograms; and

(W) 100 *palas* make one *tulā*; (It is equivalent to 4.800 kilograms).

The above mentioned and such other weights and measures are applicable to dried articles of drugs and food ingredients.

[87-$^{1}/_{2}$ 98]

The above mentioned weights and measures, according to Dṛḍhabala, belong to *Māgadha-māna* (those prevalent in the country of *Magadha*). Another popularly used unit of weight is *rattī* (fruit of *Abrus precatorious*). According to *Magadha* tradition, ten *rattīs* constitute one *māṣa* (gram). According to Suśruta, who follows the weights and measures of *Kāliṅga* tradition, five *rattīs* constitute one *māṣa*. According to Jatūkarṇa, six *rattis* also constitute one *māṣa*.

[In addition to the above, other units of weight like *valla* which is equal to three *rattīs* are also described in the text. The Pharmacopoeia Committee has found out 125 mg. as equal to one *rattī* or *guñjā*. In this text lineal measurements like *aṅgula* (3/4th of an inch), *vitasti* (9 inches) and *hasta* (18 inches) are also mentioned.]

Doubling the Quantity of Liquids and Fresh Drugs

द्विगुणं तद्भवेच्छिष्टं तथा सद्योद्धृतेषु च।। ९८।।
यद्धि मानं तुला प्रोक्ता पलं वा तत् प्रयोजयेत्।
अनुक्ते परिमाणे तु तुल्यं मानं प्रकीर्तितम्।। ९९।।

Liquids are freshly collected herbs should be taken in double the prescribed quantity for a recipe.

If, in a recipe, the unit of measurement is described in the form of *tulā* or *pala*, then the drug of the same weight (without any change) should be used.

When the weight of ingredients in a recipe is not specified, then all these ingredients are to be taken in equal quantities.

[98 $^{1}/_{2}$ - 99]

In the above text, liquid ingredients of a recipe are stated to be used in double the prescribed quantity. But, according to the instructions provided in other texts, the ingredients whose weights are described in

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the form of *rattī* up to *kuḍava* should be used according to the prescribed quantity (and not in double the prescribed quantity). Jatūkarṇa shares this view. While describing *Suniṣaṇṇaka-cāṅgerī-ghṛta* (vide *Cikitsā* 14 : 238), Caraka has made an exception to this rule of *drava-dvaiguṇya* (doubling the prescribed quantity of liquids) by specifically mentioning that, "for the preparation of this recipe thirty two *palas* of the ingredient should be taken in the place of *prastha*". By implication, the quantity should not be doubled as prescribed in the general rule.

When an ingredient can be used both in dry and green forms, the prescribed quantity in a recipe is applicable only to the dry ingredients, and the quantity should be doubled only when their green counterparts are to be used. There are, however, herbs like *vāsā, kuṭaja, kūṣmāṇḍa, śatapatrī, sahā, amṛtā, prasāraṇī, aśvagandhā, śatapuṣpā* and *sahacara* which are generally used in green form, and their quantity should not be doubled.

Use of Water

द्रवकार्येऽपि चानुक्ते सर्वत्र सलिलं स्मृतम्।
यतश्च पादनिर्देशश्चतुर्भागस्ततश्च सः।। १००।।

Some recipes are prepared by processing with liquids. If the type of liquid is not specified, then invariably water has to be used for the preparation of such recipes.

When the quantity of the ingredient is specified as *pāda* (lit. foot), then this implies one fourth in quantity of the main ingredient in the recipe. [100]

Recipes like medicated oil and medicated ghee are to be prepared by liquids. If the type of liquid to be used is not specified then water has to be used in its place.

The term '*pāda*' (lit. foot) generally implies "a quarter". This has been reiterated here only by way of clarification.

Proportion of Ingredients in Preparation of Medicated Ghee, etc.

जलस्नेहौषधानां तु प्रमाणं यत्र नेरितम्।
तत्र स्यादौषधात् स्नेहः स्नेहात्तोयं चतुर्गुणम्।। १०१।।

If in a recipe of medicated ghee or medicated oil, the quantities of water (liquid), fat (ghee or oil) and other drugs

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(to be used in the form of paste) are not specified, then the paste of drugs should be one part, the fat (oil or ghee) should be four parts and water (including decoction, juice, milk, etc.,) should be sixteen parts, i.e. the fat should be four times in quantity of the paste, and water, decoction, etc., should be four times in quantity of the fat. [101]

In the recipes of medicated ghee or medicated oil, the quantity in which the paste, the ghee or oil and liquids like water, decoction and milk are to be used is generally specified. The same should be followed in the preparation of these recipes. There are, however, instances where the quantities of these ingredients are not specified. In such cases the rule provided in the above text has to be followed.

Three Types of Pāka (Cooking)

स्नेहपाकस्त्रिधा ज्ञेयो मृदुर्मध्यः खरस्तथा।
तुल्ये कल्केन निर्यासे भेषजानां मृदुः स्मृतः।। १०२।।
संयाव इव निर्यासे मध्यो दर्वी विमुञ्चति।
शीर्यमाणे तु निर्यासे वर्तमाने खरस्तथा।। १०३।।

Medicated ghee or medicated oil is prepared according to three different types of *pāka* (cooking), viz., *mṛdu-pāka* (mild cooking), *madhya-pāka* (moderate cooking) and *khara-pāka* (hard or strong cooking).

When the liquid fraction of the recipe including the paste takes the consistency of *saṃyāva* or gruel (a preparation of ghee, jaggery and broken pieces of wheat in a bolus form), and when the liquid including the paste slides down from the laddle, then this is called *madhya-pāka* or moderate cooking.

If the liquid along with the paste snaps when rolled by fingers, it is called *khara-pāka* (strong or hard cooking).

[102-103]

Therapeutic Effects of Medicated Oil Prepared According to Three Types of Pāka

खरोऽभ्यङ्गे स्मृतः पाको, मृदुर्नस्तःक्रियासु च।
मध्यपाकं तु पानार्थे बस्तौ च विनियोजयेत्।। १०४।।

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Medicated oil, etc., prepared according to *khara-pāka* (strong or hard cooking) are useful for massage. Those prepared according to *mṛdu-pāka* (mild cooking) are useful for inhalation therapy. Those prepared according to *madhya-pāka* (moderate cooking) are useful for being taken internally as a potion and also for medicated enema. [104]

Two Traditions for Weights and Measures

मानं च द्विविधं प्राहुः कालिङ्गं मागधं तथा।
कालिङ्गान्मागधं श्रेष्ठमेवं मानविदो विदुः।। १०५।।

Weights and measures are of two different types, viz., *Kāliṅga* (those traditionally used in the ancient land of *Kaliṅga* - part of present Orissa) and *Māgadha* (those traditionally used in the ancient land of *Magadha* - part of present day Bihar). The latter is better than the former. [105]

[Cakrapāṇi has opined this text to be unauthentic).

Summary of Kalpa Section

तत्र श्लोकौ–
कल्पार्थः शोधनं संज्ञा पृथग्घेतुः प्रवर्तने।
देशादीनां फलादीनां गुणा योगशतानि षट्।। १०६।।
विकल्पहेतुर्नामानि तीक्ष्णमध्याल्पलक्षणम्।
विधिश्चावस्थिको मानं स्नेहपाकश्च दर्शितः।। १०७।।

To sum up :

The topics discussed in the *Kalpa-section* are as follows:

(1) Objects of pharmaceutical processes; (vide *Kalpa* 1 : 3)

(2) Definition of purificatory procedure; (vide *Kalpa* 1 : 4)

(3) Raison d'etre of the effects of drugs; (vide *Kalpa* 1 : 5)

(4) Characteristics of land (clime), etc.; (vide *Kalpa* 1 : 7-11)

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(5) Attributes of *madana-phala*, etc.;
(vide *Kalpa* 1: 12)

(6) Six hundred recipes;
(vide *Kalpa* 12 : 41-42)

(7) Purpose of *vikalpa*;
(vide *Kalpa* 1 : 6)

(8) Synonyms of drugs,
(vide *Kalpa* 1 : 27; 2 : 3; 3 : 3-4; 4 : 3; 5 : 4; 6 : 3; 7 : 4, 8 : 3; 9 : 3; 10 : 8; 11 : 3; 12 : 3)

(9) Characteristics of recipes having sharp, moderate and mild actions;
(vide *Kalpa* 12 : 51-56)

(10) Management of different types of morbidities;
(vide *Kalpa* 12 : 59-85)

(11) Weights and measures; and
(vide *Kalpa* 12 :87-99, 105)

(12) Methods of preparing medicated oil and ghee;
(vide *Kalpa* 12 : 100-104) [106-107]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढबलसंपूरिते कल्पस्थाने दन्तीद्रवन्तीकल्पो नाम द्वादशोऽध्यायः।। १२।।

Thus, ends the twelfth chapter of *Kalpa-sthāna* dealing with the "Pharmaceutics of *Dantī* and *Dravantī*" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

सप्तमं कल्पस्थानम् समाप्तम्।।

Thus, ends the seventh section of *Caraka-saṃhitā* called *Kalpa-sthāna.*

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CARAKA-SAṂHITĀ

SIDDHI-STHĀNA

(SECTION ON SUCCESSFUL ADMINISTRATION OF THERAPEUTIC MEASURES)

प्रथमोऽध्यायः

CHAPTER - I

(PROCEDURE FOR SUCCESSFUL ADMINISTRATION OF PAÑCA-KARMA)

Prologue

अथातः कल्पनासिद्धिं व्याख्यास्यामः।।१।।

इति ह स्माह भगवानात्रेयः।।२।।

Now we shall expound the chapter dealing with "the Procedure for Successful Administration of *Pañca-karma* (Five Specialised Therapeutic Measures)".

Thus, said Lord Ātreya. [1-2]

In the previous section, i.e. *Kalpa-sthāna,* different pharmaceutical processes (*kalpa*) involved in the preparation of recipes for *pañca-karma* are described. These recipes are to be used according to the prescribed procedure for achieving success in the treatment. This residual part of the therapeutic measures, i.e. their successful application (*siddhi*) is being described in the present section (*sthāna*) called *Siddhi-sthāna.*

The term '*siddhi*' in the present context implies "the procedure for the administration of emetic therapy, etc., complications arising out of their improper administration, and their successful management". Since the present section (*sthāna*) deals with such measures as would lead to the success (*siddhi*) in the administration of emetic therapy, etc., it is called *Siddhi-sthāna.*

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The term '*siddhi*' can also be interpreted in a different way. At times no distinction is made between the cause (*kāraṇa*) and the effect (*kārya*). Emetic therapy, etc., are cause (*kāraṇa*), and successful treatment of diseases is the effect (*kārya*). Since emetic therapy, etc., which are the causes (*kāraṇa*) are described in this section, it is called *Siddhi-sthāna* on the basis of the effects (*kārya*) of these causative factors (*kāraṇa*). Keeping this in view, it is stated in *Sūtra* 15 : 5 that appropriate administration of emetic therapy, etc., and the management of their complications will be described in *Siddhi-sthāna*.

Because of the above interpretation of the term "*Siddhi-sthāna*", one should not extend its meaning to include *Cikitsā-sthāna* also. This term is used here in the sense of *yoga-rūḍha*. By implication, though the meaning of this term etymologically can be extended to other sections, in the present context, it refers to only *Siddhi-sthāna*.

Queries of Agniveśa

का कल्पना पञ्चसु कर्मसूक्ता, क्रमश्च कः, किं च कृताकृतेषु।
लिङ्गं तथैवातिकृतेषु, संख्या का, किं गुणः, केषु च कश्च बस्तिः।। ३।।
किं वर्जनीयं प्रतिकर्मकाले, कृते कियान् वा परिहारकालः।
प्रणीयमानश्च न याति केन, केनैति शीघ्रं, सुचिराच्च बस्तिः।। ४।।
साध्या गदाः स्वैः शमनैश्च केचित् कस्मात् प्रयुक्तैर्न शमं व्रजन्ति।
प्रचोदितः शिष्यवरेण सम्यगित्यग्निवेशेन भिषग्वरिष्ठः।। ५।।
पुनर्वसुस्तन्त्रविदाह तस्मै सर्वप्रजानां हितकाम्ययेदम्।

Agniveśa, the foremost among the disciples (of Punarvasu Ātreya) put forth queries before his preceptor as follows :

(1) What is the prescribed procedure for the administration of *pañca-karma* (five specialised therapies)?
[The answer will be provided in the verse nos. 6 $^{2}/_{4}$ - $^{2}/_{4}$ 10]

(2) In which order these therapies are to be administered?
[The answer will be provided in verse nos. $10^{2}/_{4}$ - $^{2}/_{4}$15]

(3) What are the signs of proper, improper and excessive administration of these therapies?

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[The answer will be provided in the verse nos. 15 $^{2}/_{4}$ - 24, 40 $^{2}/_{4}$ - $^{2}/_{4}$ 47]

(4) What is the number of enemata to be given ?
[The answer will be provided in the verse nos. 25-26 and 47 $^{2}/_{4}$ - 50]

(5) What are the therapeutic effects of medicated enema (*basti*) ?
[The answer will be provided in the verse nos. 27-34, 38 - $^{2}/_{4}$ 40]

(6) What type of *basti* (medicated enema) is useful for which type of disease?
[The answer will be provided in the verse nos. 36-37]

(7) What is to be avoided during the course of the treatment ?
[The answer will be provided in the verse nos. 54 $^{2}/_{4}$ - $^{2}/_{4}$ 55]

(8) What should be the interval between the administration of different therapies?
[The answer will be provided in the verse no. $^{2}/_{4}$ 54]

(9) What for the recipe of enema, when administered, does not enter into the rectum?
[The answer will be provided in the verse nos. 55 $^{2}/_{4}$ - $^{2}/_{4}$ 56]

(10) What makes the recipe of enema to come out earlier than the scheduled time ?
[The answer will be provided in the verse nos. 56 $^{2}/_{4}$ - $^{2}/_{4}$ 57]

(11) What is the cause of delay in the evacuation of the administered recipe of medicated enema? and
[The answer will be provided in the verse no. $^{2}/_{4}$ 56]

(12) Why some diseases though curable do not get cured

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even when recipes for each of these are administered? [The answer will be provided in verse nos. 57 $^{2}/_{4}$ - $^{2}/_{4}$ 59]

Having regard to these (above mentioned) questions, Punarvasu, who is the foremost among physicians and who is well-versed in scriptures, replied as follows with a view to promote the welfare of human beings. [3 - $^{2}/_{4}$ 6]

Pañca-karmas (five specialised therapies) play an important role in the success of therapeutics. Therefore, The method of administration (*kalpanā*) of these five types of therapies, viz., emesis, etc., leading to success (*siddhi*) is called *Kalpanā-siddhi* which is the title of this first chapter of *Siddhi* section.

In the above text, twelve questions of the disciple are enumerated. Answers to each of these questions will be elaborated later in this chapter.

Specific questions of the disciple illuminate the intellect of the teacher to give appropriate answer. This point has been elaborated by Bharadvāja in his work [no more extant now].

The question no. 12 deals with the reasons for which a curable disease does not get cured even when recipes for it are administered. If the recipes are appropriate then there is no question of a curable disease not getting cured. Therefore, the question refers to curable diseases not getting cured because of inappropriate recipes / therapies.

Duration of Oleation Therapy

त्र्यहावरं सप्तदिनं परं तु स्निग्धो नरः स्वेदयितव्य उक्तः।। ६।।
नातः परं स्नेहनमादिशन्ति सात्म्यीभवेत् सप्तदिनात् परं तु।

Fomentation therapy should be administered to a person after he has undergone oleation therapy continuously for a minimum period of three days, or a maximum period of seven days. Oleation therapy is not recommended to be continued after the seventh day because by then the person's body gets saturated (*sātmyī-bhavet*) with it. [$6^{2}/_{4}$ - $^{2}/_{4}$ 7]

The first query of Agniveśa is about *kalpanā* or procedure of the administration of five specialised therapies (*pañca-karma*). Oleation and fomentation therapies are given prior to the administration of

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pañca-karma as a preparatory measure. Thus, these two practically constitute parts of *pañca-karma*; hence these are elaborated in the above text.

Oleation therapy can be administered continuously for a maximum period of seven days because the body of a person gets saturated with these different types of fat (oil, ghee, muscle-fat and bone-marrow) within these seven days. After the seventh day, further oleation is not possible because the body has already become saturated with these fats. This is the normal phenomenon. If, however, because of any abnormal situation, the body of the individual does not get saturated with fat even after giving oleation therapy for seven days then the therapy can be continued. In such situations, traditionally, ayurvedic physicians interrupt the oleation therapy for a few days, and thereafter, commence again giving *sneha* in a higher dose.

The prescribed duration of oleation therapy for minimum three days and maximum seven days is with reference to the nature of *koṣṭha* (condition of the bowel). If the person has *mṛdu-koṣṭha* (laxed bowel), then administration of medicated ghee, etc., for three days will be enough for proper oleation. If the patient is of *krūra-koṣṭha* (costive bowel), then proper oleation of the body is achieved by giving medicated ghee, etc., for seven days (vide *Sūtra* 13 : 65).

If a person of *krūra-koṣṭha* (costive bowel) gets oleated by taking medicated ghee, etc., where was the need for describing the prohibition of such oleation therapy thereafter ? A person with *krūra-koṣṭha*, no doubt gets oleation in seven days time, but only the recipes of medicated ghee, etc., are given in sufficient dose. If the dose is less than what is required for *krūra-koṣṭha*, then the person does not get oleated properly even in seven days, and he may need the recipe for more days to get oleated properly. In some other texts, oleation therapy is described to be given for either three, six or nine nights (days). This exceeds the limit of seven days which is not acceptable to the present author.

The above statement in other texts can be explained in a different way. The recipe for oleation therapy can be given exceeding the limit of seven days only when the body is not saturated with medicated ghee, etc., within the prescribed limited period of seven days.

Though it is mentioned that the minimum period of oleation should be three days, there are recipes which cause instantaneous oleation even within one day.

Koṣṭha (nature of the bowel) is of three types, viz., *krūra-koṣṭha*

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(costive bowel), *madhya-koṣṭha* (moderate bowel) and *mṛdu-koṣṭha* (laxed bowel). For *krūra-koṣṭha*, oleation therapy is prescribed to be given for seven days, and for *mṛdu-koṣṭha*, the same is prescribed to be given for three days. For *madhya-koṣṭha*, though not specified in the text, the duration of oleation therapy should be between three and seven days, i.e. for five days only.

Some scholars hold the view that a person with *mṛdu-koṣṭha* (laxed bowel) should not be given oleation therapy for more than three days because according to them, the body of such type of persons gets saturated with fat within three days itself. This type of interpretation of the text is not convincing to the mind because the Preceptor has clearly stated in the above text that the body gets saturated (*sātmyī-bhavet*) in seven days time. By implication, if a person with *mṛdu-koṣṭha* does not get oleated in three days time because of the small dose of the recipe, then he should be given the therapy for more than three days.

Therapeutic Effects of Oleation Therapy

स्नेहोऽनिलं हन्ति मृदूकरोति देहं मलानां विनिहन्ति सङ्गम्।। ७।।

Oleation therapy alleviates aggravated *vāyu*, softens the body and disintegrates the adhered morbid material [in the channels of circulation.] [7 $^{2}/_{4}$]

Therapeutic Effects of Fomentation Therapy

स्निग्धस्य सूक्ष्मेष्वयनेषु लीनं स्वेदस्तु दोषं नयति द्रवत्वम्।

In the person who has undergone oleation therapy, fomentation liquefies the adhered morbid material (even) in the fine channels of his body. [$^{2}/_{4}$ 8]

Measures for Exciting Morbid Material

ग्राम्यौदकानूपरसैः समांसैरुत्क्लेशनीयः पयसा च वम्यः।। ८।।
रसैस्तथा जाङ्गलजैः सयूषैः स्निग्धैः कफावृद्धिकरैर्विरेच्यः।

The person who is to be administered emesis should be given milk and the meat as well as meat-soup of domesticated, aquatic and wet-land inhabiting animals as food for the excitation [of *kapha*].

The person who is to be given purgation therapy should be given soup of the meat of animals inhabiting in arid zone

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and vegetable-soup added with fat [for the excitation of *pitta*] which do not cause aggravation of *kapha*. [$8^{2}/_{4}$ - $^{2}/_{4}$ 9]

To the person who is to be administered emesis, the above mentioned diet (described in the first paragraph) should be given for one day prior to the day of the administration of the therapy. To the person who is to be administered purgation, the above mentioned diet (described in the second paragraph) should be given for three days prior to the day of the administration of the therapy - vide *Sūtra* 13 : 80-81.

Reasons for Emetics and Purgatives Working in Opposite Ways

श्लेष्मोत्तरश्छर्दयति ह्यदुःखं विरिच्यते मन्दकफस्तु सम्यक्।। ९।।
अधः कफेऽल्पे वमनं विरेचयेद्विरेचनं वृद्धकफे तथोर्ध्वम्।

A person with excessively aggravated *kapha* vomits without any difficulty, and the person having less of aggravated *kapha* purges well. However, if there is less of [aggravated] *kapha*, then the emetic recipe causes purgation through the downward tract, and in the state of aggravated *kapha*, the purgative recipe causes emesis through the upward tract.

[$9^{2}/_{4}$ - $^{2}/_{4}$ 10]

Order of Administering Emetic and Purgation Therapies

स्निग्धाय देयं वमनं यथोक्तं वान्तस्य पेयादिरनुक्रमश्च।। १०।।
स्निग्धस्य सुस्विन्नतनोर्यथावद्विरेचनं योग्यतमं प्रयोज्यम्।

Emetic therapy should be administered to a person according to the appropriate procedure (described in *Kalpa* 1 : 14) after his body is oleated with oleation therapy.

After emesis, he should be given systematic dietetic regimen (*saṃsarjana-krama*) with *peyā* (thin guel), etc. Thereafter, the person who has undergone oleation and fomentation therapies, should be administered the best suited purgation therapy appropriately (ref. *Sūtra* 15 : 17).

[$10^{2}/_{4}$ - $^{2}/_{4}$ 11]

The term '*snigdhāya*' in the above text implies that the person should be given a massage with medicated oil in the morning before the

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administration of emetic therapy because the other form of oleation, viz., internal administration of ghee, etc., is already described before, and its repetition is unnecessary here. According to some scholars, this term '*snigdhāya*' may be interpreted as "the person who has already been oleated".

On the line suggested for emesis, the patient should also be given oleation and fomentation therapies before the administration of purgation therapy independently. The procedure has also to be followed even if the purgation therapy is administered after emetic therapy. After emesis, the patient should be given restricted dietetic regimen (*saṃsarjana-krama*) which should be followed by oleation and fomentation therapies, and therefter, purgation therapy should be given. Before purgation therapy, of course, as suggested before, *doṣa* (*pitta*)-exciting diet (*prati-bhojana*) should be given for three days. Since this has already been described in *Sūtra* 13 : 80, the same is not repeated here.

Post-therapeutic Measures (Saṃsarjana-krama)

पेयां विलेपीमकृतं कृतं च यूषं रसं त्रिद्व्रिरथैकशश्च।। ११।।
क्रमेण सेवेत विशुद्धकायः प्रधानमध्यावरशुद्धिशुद्धः।

After the body is cleansed of the morbidities [by emetic and purgation therapies], the patient should be given as food *peyā* (thin gruel), *vilepī* (thick gruel), *akṛta* as well as *kṛta-yūṣa* (unseasoned and seasoned vegetable juice) and *akṛta* as well as *kṛta-rasa* (unseasoned and seasoned meat-soup). Each of these dietary items should be given for three, two or one meal times to the person whose body is cleansed in accordance with either *pradhāna-śuddhi* (maximum cleansing), *madhya-śuddhi* (moderate cleansing) or *avara-śuddhi* (minimum cleansing) respectively. [$11^{2}/_{4}$ - $^{2}/_{4}$ 12]

Four types of dietetic preparations, viz., *maṇḍa, peyā, yavāgū* and *vilepī* are different in their stickiness and density. *Maṇḍa* is without any stickiness, *peyā* is associated with stickiness, *yavāgū* is exceedingly sticky, and *vilepī* is very thick in nature. Of these, *peyā* and *vilepī* are prescribed above to be taken by the person after emetic and purgation therapies.

According to *Sūda-śāstra* (Culinary science), vegetable-soup prepared without seasoning with fat, salt and pungent spices is called *akṛta-yūṣa;* vegetable-soup seasoned with these ingredients is called

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kṛta-yūṣa; meat-soup prepared without seasoning with these ingredients is called *akṛta-rasa;* and meat-soup prepared by seasoning with these ingredients is called *kṛta-rasa.*

Each of these food items, viz., *peyā, vilepī, akṛta* as well as *kṛta-yūṣa* and *akṛta* as well as *kṛta-rasa* are to be given for three, two or one meal times to the person who has undergone *pradhāna-śuddhi* (maximum cleansing), *madhya-śuddhi* (moderate cleansing) and *avara-śuddhi* (minimum cleansing) respectively.

The patient who has been administered emetic or purgation therapy in the morning should keep fast in the noon time. Giving the above mentioned restricted food should commence from the evening of that day. *Peyā* should be given to him in the evening of that day and during the two meal times of the next day (three meal times in total). *Vilepī* should be given for the next three meal times. Rice with *akṛta* as well as *kṛta-yūṣa* should be given for the subsequent three meal times. Rice with *akṛta* as well as *kṛta-rasa* should be given for the subsequent three meal times. Thus, the administration of these restricted food continues for seven days in the case of the person who has undergone *pradhāna* or *pravara-śuddhi.*

In the above mentioned diet-schedule, *akṛta-yūṣa* as well as *kṛta-yūṣa* are described to be given for three meal time. There is no specific indication as to for how many meal times the former and for how many meal times the latter has to be given. Therefore, in the beginning, *akṛta-yūṣa* and latter *kṛta-yūṣa* should be given. Similar procedure should be followed in respect of *akṛta-rasa* and *kṛta-rasa.*

For the person who has undergone *madhya-śuddhi* (moderate cleansing), each of the above mentioned restricted diet should be given for two meal times. If the person has undergone *avara-śuddhi* (minimum cleansing), then each of the above mentioned restricted diet has to be given for one meal-time each. Since *akṛta* as well as *kṛta yūṣa,* are prescribed to be given only during one meal time, giving them separately is not possible. These two forms of vegetable-soups, and also meat-soups are to be given only after light seasoning.

In the case of *pradhāna-śuddhi* (maximum cleansing), morbid matter from the body gets eliminated in large quantity leading to excessive suppression of the power of digestion. Therefore, *saṃsarjana-krama* (restricted dietetic regimen) has to be followed for a longer period.

Signs and symptoms of *pradhāna-śuddhi* (maximum cleansing), etc., are to be described later (in subsequent verse nos. 13-15).

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[In *Sūtra* 15 : 16, restricted meals are prescribed to be given beginning from the same evening or from the next morning of the day of the administration of the therapy. Cakrapāṇi's commentary on this paragraph is very significant. According to him, if the patient is properly cleansed, then restricted diet should be given on the same evening. If he is not properly cleansed, then he should not be given any meal in the evening and the restricted meals should be started from the morning of the next day.]

Effects of Saṃsarjana-krama

यथाऽणुरग्निस्तृणगोमयाद्यैः संधुक्ष्यमाणो भवति क्रमेण।। १२।।
महान् स्थिरः सर्वपचस्तथैव शुद्धस्य पेयादिभिरन्तरग्निः।

As a small spark of fire gets kindled into a big and stable flame when fed gradually with dry grass, cow-dung cake, etc., similarly the internal fire or the enzymes in the body responsible for digestion and metabolism [which was subdued because of purificatory measures] in a purified person grows strong and stable, and becomes capable of digesting all types of food by the [gradual] administration of *peyā* (thin gruel), etc.

[$12\,{}^{2}/_{4}$ - ${}^{2}/_{4}$ 13]

Characteristics of Three Types of Emesis and Purgation

जघन्यमध्यप्रवरे तु वेगाश्चत्वार इष्टा वमने षडष्टौ।। १३।।
दशैव ते द्वित्रिगुणा विरेके प्रस्थस्तथा द्वित्रिचतुर्गुणश्च।
पित्तान्तमिष्टं वमनं विरेकादर्धं कफान्तं च विरेकमाहुः।। १४।।
द्वित्रान् सविट्कानपनीय वेगान्मेयं विरेके वमने तु पीतम्।

[As regards emetic therapy] in *jaghanya* or *avara-śuddhi* (minimum type of cleansing), *madhya-śuddhi* (moderate type of cleansing) and *pravara-śuddhi* (maximum type of cleansing), the person gets four, six and eight bouts of vomiting respectively.

[As regards purgation therapy] in *jaghanya-śuddhi*, *madhya-śuddhi* and *pravara-śuddhi*, the patient purges for ten, twenty and thirty times respectively. In these three types of *śuddhi*, the quantity of stool voided by the patient is two, three and four *prasthas* respectively.

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It is desirable that the emetic therapy should end up with the vomiting of bile, and the vomited material should be half of what is described for purgative therapy. [By implication, in the *jaghanya-śuddhi, madhya-śuddhi* and *pravara-śuddhi,* the vomited material should be one, one and a half, and two *prasthas* respectively].

The purgation therapy should end up with the voiding of *kapha* (phlegm).

In the case of purgation therapy, the first two or three motions containing feces should not be taken into account while measuring the quantity of voided material. Similarly, in the case of emetic therapy, the quantity of drugs taken for the therapy should be excluded while measuring the vomited material. [$13^{2}/_{4}$ - $^{2}/_{4}$ 15]

The measurement of the vomited material in emetic therapy, and voided material in purgation therapy is described in the unit quantity of *prastha.* Generally, sixteen *palas* (one *pala* = 48 gms.) constitute one *prastha.* But this general rule does not apply for the measurement of the material in emetic, purgation and blood-letting therapies where (as an exception to this general rule) thirteen and a half *palas* constitute one *prastha.*

The end of emetic therapy is described to be the vomiting of *pitta* (bile), and of purgation therapy to be the voiding of *kapha* (phlegm). This equally applies to all the three types of *śuddhi* or cleansing, viz., *jaghanya* or *avara* (minimum cleansing), *madhya* (moderate cleansing) and *pradhāna* or *pravara* (maximum cleansing).

In the case of emetic therapy, if there are four bouts of vomiting, elimination of one *prastha* of vomited material and the end product of vomiting is *pitta* or bile, then this should be termed as *jaghanya-śuddhi* (inferior types of cleansing). In the case of purgation therapy, if there are ten urges for voiding, elimination of two *prasthas* of voided material and the end product is *kapha* (phlegm) then this should be termed as *jaghanya-śuddhi.*

Similarly, in *madhya-śuddhi* (moderate cleansing) and *pravara-śuddhi* (maximum cleansing), the end product is *pitta* (bile) and *kapha* (phlegm) respectively with regard to emetic and purgation therapies.

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After the occurence of different number of urges and quantities of vomited and voided material, the sign of properly administered emetic and purgation therapies should appear inasmuch as at the end of emetic therapy, *pitta* or bile should appear and at the end of purgation therapy, *kapha* or phlegm should appear.

Some scholars interpret the above text [and the text of verse nos. $15^{2}/_{4}$ - $^{2}/_{4}16$; $17^{2}/_{4}$ - $^{2}/_{4}18$] as the description of four independent parameters to determine the appropriate administration of emetic and purgation therapies as follows :

(1) *Āntikī,* i.e. depending upon the end-product (in the case of emetic therapy, the end product should be bile and in the case of purgation therapy the end-product should be phlegm);

(2) *Vaigikī,* i.e. depending upon the number of bouts of vomiting and purgation;

(3) *Mānikī,* i.e. depending upon the quantity of material eliminated by vomiting and purgation; and

(4) *Laiṅgikī,* i.e. depending upon the signs and symptoms which appear after emesis and purgation (to be described in verse nos. $15^{2}/_{4}$ - $^{2}/_{4}16$; $17^{2}/_{4}$ - $^{2}/_{4}18$).

The above mentioned presumption is not correct (according to Cakrapāṇi). Āṣāḍha-varman (another commentator of *Caraka*) has also referred to the above mentioned four items, and raised the question if all these four items individually or taken together constitute the signs of proper administration of emetic and purgation therapies. Such questions are irrelevant. Similar doubts had also been raised by other commentators. To avoid details, these are not being discussed here.

The terms like *jaghanya-śuddhi, madhya-śuddhi* and *pravara-śuddhi* mentioned above, should be interpreted as referring to the cleansing of less aggravated, moderately aggravated and excessively aggravated *doṣas* respectively.

The number of urges, etc., described in the above text, in respect of *jaghanya-śuddhi,* etc., should be treated as general statements. Actually, depending upon the state of aggravated *doṣas*, the measurement of the material eliminated varies.

To sum up : When with eight bouts of vomiting, two *prasthas* of morbid material is eliminated, then this should be treated as *pravara-śuddhi* (maximum cleansing); when with six bouts of vomiting, one and half *prasthas* of morbid material is eliminated, then this should be

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considered as *madhya-śuddhi* (moderate cleansing); and when with four bouts of vomiting one *prastha* of morbid material is eliminated, then this should be considered as *jaghanya-śuddhi* (inferior or minimum cleansing). Similarly, different types of cleansing by purgation therapy may be explained.

The term '*pittāntam*' used in the above text implies the elimination of *pitta* or bile at the end of the emetic therapy. Similarly, the term '*kaphāntam*' used above implies the elimination of *kapha* or phlegm at the end of the purgation therapy. In the verse no. $15^{2}/_{4}$ of this chapter, it will be described that in emetic therapy when appropriately administered, *kapha*, *pitta* and *vāyu* get eliminated in succession. Similarly, in the verse no. $^{2}/_{4}18$, it will be described that in purgation therapy, when appropriately administered, feces, *pitta*, *kapha* and *vāyu* get eliminated in succession. There is no contradiction between the statements made in the present text also in the statements to be made in $15^{2}/_{4}$ as well as in $^{2}/_{4}18$. Elimination of *vāyu* (flatus or wind) at the end in both the cases is indicative of the elimination of *pitta* at the end of emetic therapy and elimination of *kapha* at the end of purgation therapy. It is the residual *vāyu* (flatus or wind) which gets eliminated after *pitta* in emetic therapy, and after *kapha* in the case of purgation therapy.

If, as described above, verse nos. $15^{2}/_{4}$ and $^{2}/_{4}18$ have similar implications then where was the need for describing '*pittāntatva*' (elimination of *pitta* at the end of emetic therapy) and '*kaphāntatva*' (elimination of *kapha* at the end of purgation therapy) in the above text? This statement is relevant because in different types of *śuddhi* (cleansing) like *jaghanya*, etc., the number of bouts of emesis and purgation, and the quantity in which the morbid matter gets eliminated may vary because of which the disciple may get confused about the exact nature of the *śuddhi*. If a person has excessively aggravated *doṣa*, but he gets fewer bouts of urge for emesis and for purgation without the elimination of *pitta*, etc., then the disciple may mistake it as *jaghanya-śuddhi*, etc., eventhough it amounts to inappropriate administration of the therapy, and not *jaghanya* type of cleansing. Elimination of *pitta*, etc., at the end certainly gives the clue to the nature (*jaghanya*, etc.,) of *śuddhi* (cleansing).

For the measurement of morbid material (*doṣa*) coming out of purgation therapy, it is stated that the first bouts of purgation containing feces should not be taken into account. In some persons the feces may come out in two bouts of purgation, and in some others feces continue to be eliminated even in the third bout. Therefore, description of a fixed

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number of bouts to be excluded while measuring the morbid material is avoided in the text above.

In the case of emetic therapy, the quantity of recipe taken for emesis should be excluded while measuring the output of the morbid material.

Signs of Appropriately Administered Emetic Therapy

क्रमात् कफः पित्तमथानिलश्च यस्यैति सम्यग्वमितः स इष्टः।। १५।।
हृत्पार्श्वमूर्धेन्द्रियमार्गशुद्धौ तथा लघुत्वेऽपि च लक्ष्यमाणे।

A person who expels *kapha* (phlegm), *pitta* (bile) and *vāyu* (flatus and wind) in succession, who feels clarity in his heart, sides of the chest, head and channels of sense organs, and who feels lightness of his body is to be considered as having undergone emetic therapy appropriately.

[15 $^{2}/_{4}$ - $^{2}/_{4}$ 16]

In emetic therapy, *kapha*, *pitta* and *vāyu* should get eliminated in succession. If this does not happen, and if *pitta* gets eliminated before the elimination of *kapha*, then this is not proper. *Kapha* is located in the upper part of the *āmāśaya* (stomach), and *pitta* is located in the lower part of *āmāśaya* (duodenum). Therefore, *kapha* located in the upper part should get eliminated before the elimination of *pitta*. Only then the emetic therapy is to be considered as appropriately administered.

The term '*krama*' (in succession) described in connection with the appropriate administration of purgation therapy (vide verse no. $^{2}/_{4}$18) has also to be explained accordingly.

Signs of Inappropriately Administered Emetic Therapy

दुश्छर्दिते स्फोटककोठकण्डूहृत्खाविशुद्धिर्गुरुगात्रता च।। १६।।

If the emetic therapy is inappropriately administered (in less quantity), then this gives rise to *sphoṭaka* (pustular eruptions), *koṭha* (urticaria), *kaṇḍū* (itching), lack of clarity in the heart as well as sense organs and heaviness of the body.

[16 $^{2}/_{4}$]

In the above text, the term '*duśchardite*' implies *ayoga*, i.e. the administration of the emetic recipe in less quantity.

Signs of Emetic Therapy Administered in Excess

तृण्मोहमूर्च्छानिलकोपनिद्राबलादिहानिर्वमनेऽति च स्यात्।

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If there is excessive administration of emetic therapy, then the person suffers from thirst, *moha* (unconsciousness), *mūrcchā* (fainting), aggravation of *vāyu*, insomnia, debility, etc.

The term '*ādi*' (meaning etcetera) implies reduction in complexion and voice.

Signs of Appropriately Administered Purgation Therapy

स्रोतोविशुद्धीन्द्रियसंप्रसादौ लघुत्वमूर्जोऽग्निरनामयत्वम्।। १७।।
प्राप्तिः विट्पित्तकफानिलानां सम्यग्विरिक्तस्य भवेत् क्रमेण।

If the purgation therapy is appropriately administered, then the person gets purity of the channels of circulation, clarity of the sense organs, lightness of the body, energetic, promotion of *agni* (power of digestion and metabolism), freedom from diseases (caused by *doṣas* for which the purgation therapy was administered) and expulsion of feces, *pitta* (bile), *kapha* (phlegm) and *vāyu* (glatus) in succession.

Signs of Improperly Administered Purgation Therapy

स्याः श्लेष्मपित्तानिलसंप्रकोपः सादस्तथाऽग्नेर्गुरुता प्रतिश्या।। १८।।
तन्द्रा तथा च्छर्दिररोचकश्च वातानुलोम्यं न च दुर्विरिक्ते।

If the purgation therapy is improperly administered, (i.e. with the recipe of small quantity), then the person gets excessive aggravation of *kapha*, *pitta* and *vāyu*, suppression of *agni* (power of digestion and metabolism), heaviness of the body, coryza, drowsiness, vomiting, anorexia and absence of downward movement of the flatus. [18 $^{2}/_{4}$ - $^{2}/_{4}$ 19]

Signs of Purgation Therapy Administered in Excess

कफास्रपित्तक्षयजानिलोत्थाः सुप्त्यङ्गमर्दक्लमवेपनाद्याः।। १९।।
निद्राबलाभावतमःप्रवेशाः सोन्मादहिक्काश्च विरेचितेऽति।

Excessive administration of purgation therapy gives rise to ailments caused by the aggravation of *vāyu* as a result of the diminution of *kapha*, blood as well as *pitta*, numbness, malaise, *klama* (mental fatigue), tremor, etc., insomnia, debility, fainting, insanity and hiccup. [19 $^{2}/_{4}$ - $^{2}/_{4}$ 20]

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Spacing of Therapies

संसृष्टभक्तं नवमेऽह्नि सर्पिस्तं पाययेताप्यनुवासयेद्वा।। २०।।
तैलाक्तगात्राय ततो निरूहं दद्यात्त्र्यहान्नातिबुभुक्षिताय।
प्रत्यागते धन्वरसेन भोज्यः समीक्ष्य वा दोषबलं यथार्हम्।। २१।।
नरस्ततो निश्यनुवासनार्हो नात्याशितः स्यादनुवासनीयः।

After *saṃsarjana-krama* (intake of regulated diet), on the ninth day [of emesis], the patient should be given a potion of ghee [if purgation therapy is intended to be given subsequently]. Similarly, on the ninth day of purgation therapy, after *saṃsarjana-krama, anuvāsana,* i.e. unctuous enema should be given [if *nirūha* type of medicated enema is intended to be given subsequently].

For three days, thereafter, the body of the person should be massaged with medicated oil, and then *nirūha* or evacuative type of medicated enema should be given when the person is not very hungry.

After the recipe of *nirūha* (evacuative enema) has come out, the patient should be given meat-soup of *jāṅgala* type of animals (those inhabiting arid forest zone) or any other appropriate diet depending upon the nature of *doṣas* and the power of *agni* (enzymes responsible for digestion and metabolism).

Thereafter, when the patient has not taken a heavy meal in the night, *anuvāsana* or unctuous type of medicated enema should be given to him if he is fit for such *anuvāsana* therapy.

[20 $^{2}/_{4}$ - $^{2}/_{4}$ 22]

For seven days starting from the day of the emetic or purgation therapy, the patient should be given *saṃsarjana-krama* (regulated dietetic regimen), and on the eighth day he should be given normal food. Thereafter, on the ninth day he should be given a potion of ghee (for oleation if after the emetic therapy, purgation therapy is intended to be given) or *anuvāsana* i.e. unctuous type of medicated enema (if *nirūha-basti* is intended to be given after purgation therapy).

Anuvāsana or unctuous type of medicated enema is prescribed for

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oleation (as a preparatory therapy) before the administration of *nirūha* or evacuative type of medicated enema. On the same line, after emetic therapy and just before the administration of purgation therapy, a potion of ghee is prescribed here to be taken because this oleation therapy was not described ealier. Therefore, it should not be construed that both the types of oleation therapy, viz., *sarpiḥ-pāna* (intake of the potion of ghee) or *anuvāsana* (unctuous type of medicated enema) are indicated to be given prior to the administration of *nirūha* or evacuative type of medicated enema.

The ninth day described above should be calculated beginning from the day of the administration of emetic or purgation therapy. This view is supported by the statements made in *Jatūkarṇa-saṃhitā* and *Suśruta-saṃhitā* (vide *Suśruta* : *Cikitsā* 37 : 3).

In *Bhadra-śaunaka-saṃhitā, anuvāsana* or unctuous type of medicated enema is suggested to be given after one month. This refers to either the preparatory measure before *anuvāsana* therapy or the administration of this therapy for curing a specific disease. Therefore, it is not contradictory to the general statement made above.

This text has been differently interpreted by various commentators like Aṅgiri, Saindhava, Jejjaṭa and Īśvara-sena. Other commentators have, however, have contradicted their interpretations by finding fault with them.

The term '*tailākta-gātrāya*' means "of the person whose body is smeared with oil". By implication, oil massage should be given before the administration of *nirūha* or evacuative type of medicated enema. Of course, before the administration of *nirūha*, in addition to oil massage, fomentation therapy should be given as per the general statement made in respect of all the five specialised therapies (*pañca-karma*)-vide *Sūtra* 2 : 15.

The term '*tryahāt*' implies that *nirūha* should be given within three days after *anuvāsana*. By implication, *nirūha* can be given on the next day, second day, third day or even on the same day when *anuvāsana* is to be administered.

Nirūha is prescribed to be given to a person who is not very hungry. If he is very hungry, then the *nirūha* therapy may produce strong effect inasmuch as it may move upwards.

After *nirūha,* the patient is prescribed to be given the meat-soup of animals inhabiting arid zone forests because unlike purgation therapy, *nirūha* does not cause suppression of *agni* (power of digestion and

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metabolism). This has been made clear in *Bhoja-saṃhitā*. Of course, depending upon the nature of *doṣas* and the power of *agni*, appropriate diet has to be given to the patient after the administration of *nirūha*.

Anuvāsana is stated to be given to the person at night after *nirūha*. Of course, in winter and spring, such *anuvāsana* therapy should not be given at night. According to some other physicians, in winter and spring, *anuvāsana* should be given only in the evening, and not at night.

The term '*anuvāsanārhaḥ*' implies that the patient should be given *anuvāsana* only if he is fit for this therapy. If there is *āma-doṣa* (product of improper digestion and metabolism) or if there is suppression of *agni*, then *anuvāsana* should not be given on the same day. According to Jatūkarṇa, *anuvāsana* should be given only on the second day. Hārīta also prescribes *anuvāsana* therpy to be given on the day after the administration of *nirūha* therapy.

If there is aggravation of *vāyu*, then *anuvāsana* should be given after *nirūha*.

Time of Anuvāsana

शीते वसन्ते च दिवाऽनुवास्यो रात्रौ शरद्ग्रीष्मघनागमेषु।। २२।।
तानेव दोषान् परिरक्षता ये स्नेहस्य पाने परिकीर्तिताः प्राक्।

In the winter and spring seasons, *anuvāsana* or unctuous type of medicated enema should be given during the day time; and in autumn, summer as well as rainy seasons, it should be administered during the night time. Care should be taken to avoid mistakes as described earlier (vide *Sūtra* 13 :19-21) in respect of the administration of oleation therapy.

[22 $^{2}/_{4}$ - $^{2}/_{4}$ 23]

Śīta or winter season described above includes both *śiśira* (early winter) and *hemanta* (late winter) seasons. Earlier *anuvāsana* therapy is prescribed to be given during the night. In the above verse this therapy is described to be given during day time in the winter and spring seasons. By implication, in these seasons, *anuvāsana* should be given at the end of the day i.e. during the evening, which is nearest to the night. Similarly, in autumn, summer and rainy seasons, *anuvāsana* therapy is stated to be given during the night time. By implication, during these seasons, this therapy should be given in the early part of the night which is nearer to the day time.

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In *Sūtra* 13 : 19-21, while describing the procedure for the administration of oleation therapy, certain adverse effects are mentioned to take place if this therapy is given in inappropriate time. Similar adverse effects are likely to be manifested if *anuvāsana* therapy is administered in inappropriate time.

In *Sūtra* 13 : 19, apart from the season, oleation therapy is described to be given during the day or night depending upon the nature of the aggravated *doṣas*. The same rule is applicable to the administration of *anuvāsana* therapy also. Mention of one part (*ekadeśa*) of a statement naturally covers the other part (*aparaikadeśa*) of it as a general rule of logic (*samāna-nyāya*).

Frequency of Anuvāsana Therapy

प्रत्यागते चाप्यनुवासनीये दिवा प्रदेयं व्युषिताय भोज्यम्।। २३।।
सायं च भोज्यं परतो द्व्यहे वा त्र्यहेऽनुवास्योऽहनि पञ्चमे वा।
त्र्यहे त्र्यहे वाऽप्यथ पञ्चमे वा दद्यान्निरूहादनुवासनं च।। २४।।

After the recipe of *anuvāsana* has come out of the anal tract, the patient should not take any food at night. During the next day, food should be given to him during the day time and in the evening. Thereafter, on the second, third or fifth day, *anuvāsana* should be given. After that, every third or fifth days *nirūha* type of medicated enema should be given followed by *anuvāsana*. [$23\ ^{2}/_{4}$ - 24]

After the unctuous recipe used for *anuvāsana* comes out of the rectum, the patient should again be given *anuvāsana* on the second day if there is excessively aggravated *vāyu*, on the third day if *vāyu* is moderately aggravated and on the fifth day if *pitta* and *kapha* are aggravated. Giving *anuvāsana* on the second day is also described in the *Hārīta-saṃhitā*. *Suśruta-saṃhitā* (vide *Suśruta* : *Cikitsā* 37 : 79) has in fact suggested *anuvāsana* to be given repeatedly every day if *vāyu* is aggravated in excess. In *Siddhi* 4 : 46, *anuvāsana* is also suggested to be given every day if there is aggravation of *vāyu*.

The terms '*dvyahan*' and '*tryahan*' imply "on the second day" and "on the third day" beginning from the day and not after the second and third days of the first *anuvāsana* therapy.

[Eventhough Cakrapāṇi has accepted the above text as authentic, according to his commentary, it appears, he had a slightly different text, viz., "*pratyāgate cāpyuṣitasya kāle bhojyam divā sāyamataḥ paraṃ tu,*

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tryahe tryahe vāpyatha pañcame vā dadyānnirūhādanuvāsanam tu". This text is given as a variant reading in the foot-note in *Nirṇaya-sāgara* edition of this work (1941).

Number of Anuvāsana-basti

एकं तथा त्रीन् कफजे विकारे पित्तात्मके पञ्च तु सप्त वाऽपि।
वाते नवैकादश वा पुनर्वा बस्तीनयुग्मान् कुशलो विदध्यात्।। २५।।

In *kaphaja* type of diseases the patient should be given one or three *bastis* (medicated enema), in *paittika* type of diseases the patient should be given five or seven bastis, and in *vātika* type of diseases the patient should be given nine or eleven *bastis*. In this way an expert physician should give *bastis* in odd numbers. [25]

In the above text and also in the text at verse nos. 47-49, the number of *bastis* to be given to a patient is described.

In the diseases caused by *kapha* and *pitta*, *anuvāsana* type of *basti* (enema) is not indicated. But when *kapha* and *pitta* are associated with *vāyu*, then *basti* should be given for which the number for *kapha* and *pitta* are described above.

Bastis are described above to be given in odd numbers. From the statement of the sage in the above text, it appears that *bastis* in such odd numbers become effective because of *prabhāva* (specific action). Similar statement is also available in *Śārīra* 8 : 5, according to which a person desirous of a son should have cohabitation on even (*yugma*) days after the purificatory bath. The rationality of prescription of *basti* on odd days has not been explained by the master in order to avoid details in the present context.

In verse no. 49, *anuvāsana-basti* is stated to be given in three, five, four or six numbers. This refers to *anuvāsana-basti* which is given for oleation before the administration of *nirūha*. [*Anuvāsana-basti* is given for two different purposes, viz., as an oleation therapy before the administration of *nirūha*, and also independently for the alleviation of *vāyu*. The latter type of *anuvāsana-basti* is described here]. Therefore, there is no contradiction between the statements made here and the one to be made in the verse no. 49.

The term '*punarvā*' used in the text implies that *anuvāsana-basti* can be given even after the eleventh day, but only on odd days intervened with *nirūha-basti*.

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[Cakrapāṇi has referred to a quotation from Āṣāḍha-varman's commentary and contradicted it. He has also referred to a quotation from *Jatūkarṇa-saṃhitā* in support of his view. Both these quotations are not comprehensible because of the absence of the texts of these commentaries].

Time Gap for Nirūha After Purgation and for Purgation After Nirūha

नरो विरिक्तस्तु निरूहदानं विवर्जयेत् सप्तदिनान्यवश्यम्।
शुद्धो निरूहेण विरेचनं च तद्धचस्य शून्यं विकसेच्छरीरम्।। २६।।

After purgation, a person should avoid *nirūha-basti* for seven days, and a person who has taken *nirūha-basti* should avoid purgation therapy for seven days because it will have injurious effects on the body which is already empty [of nourishing material] by the earlier therapy. [26]

The term '*avaśyam*' meaning 'must' implies that even if a disease can be cured by either of the two (*nirūha* and purgation) therapies administered only for one day, then also a gap of seven days must be maintained between them.

After purgation therapy, *nirūha* is prohibited, and after *nirūha* purgation therapy is prohibited in *Siddhi* 2 : 11, 14. But that statement of prohibition refers to the administration of *nirūha* and purgation immediately after purgation and *nirūha* therapies respectively. Then there is a possibility of administering such therapies after three or four days. To avoid this possibility it has been clarified in the above text that there must be a gap of seven days.

In the verse no. 20, it is already stated to give *nirūha* preceded by *anuvāsana* on the ninth day after the purgation therapy. Therefore, where was the need for giving a gap of seven days between these two therapies? The statement in the verse no. 20 refers to *saṃsarjana-krama* (regulated dietetic regimen) that continues upto seventh day only in the case of *pravara-śuddhi* (maximum cleansing). In the case of *madhya-śuddhi* (moderate cleansing) and *avara-śuddhi* (minimum cleansing), this period of *saṃsarjana-krama* will be shorter. For example, in the case of *avara-śuddhi* (minimum cleansing), the *saṃsarjana-krama* will be over in three days. On the fourth day *anuvāsana* can be given, and on the fifth or sixth day *nirūha* can be given. To avoid this possibility, therefore, a gap of seven days is specified in the above text.

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After *nirūha-basti*, no *saṃsarjana-krama* is necessary. After giving oleation therapy for three days, the patient can be given purgation therapy. To avoid this possibility, therefore, a gap of seven days between *nirūha* and purgation therapy is prescribed here.

By *nirūha* or purgation therapy, the body becomes empty of energy in addition to morbid material. If before the restoration of energy another purificatory therapy is given then that becomes injurious to the body of the patient.

Effects of Nirūha-basti

बस्तिर्वयःस्थापयिता सुखायुर्बलाग्निमेधास्वरवर्णकृच्च।
सर्वार्थकारी शिशुवृद्धयूनां निरत्ययः सर्वगदापहश्च।। २७।।
विट्श्लेष्मपित्तानिलमूत्रकर्षी दाढर्च्यावहः शुक्रबलप्रदश्च।
विश्वक्स्थितं दोषचयं निरस्य सर्वान् विकारान् शमयेन्निरूहः।। २८।।

Nirūha-basti or evacuative type of medicated enema has the following effects :

(1) It prevents ageing process of the body;

(2) It promotes happiness, longevity, strength, *agni* (power of digestion and metabolism), *medhā* (intellect), voice and complexion;

(3) It accomplishes all the objects (including mutually contradictory ones like stability or plumpness and emaciation);

(4) It is harmless for infants, old persons and youth;

(5) It helps in curing all diseases;

(6) It helps in drawing out feces, *kapha* (phlegm), *pitta* (bile), *vāyu* (wind) and urine;

(7) It promotes sturdiness of the body;

(8) It enriches semen and promotes strength; and

(9) While eliminating accumulated *doṣas* (morbid matter) from the entire body, it (*nirūha* type of enema) alleviates all the diseases. [27-28]

The description in the above text pertains to the effects of *nirūha*

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or evacuative type of medicated enema. The effect of *anuvāsana* or unctuous type of medicated enema will be described in the subsequent verses.

Nirūha is described above as "*vayaḥ-sthāpayitā*" or preventive of ageing process. It cleanses the channels of circulation (and causes rejuvenation of tissues) as a result of which youthful state of the body is restored, and the ageing process is prevented.

This *nirūha* type of medicated enema is equally harmless for infants, old persons and youth. This is mentioned here only to highlight the superiority of this therapy over emetic and purgation therapies which latter are prohibited for infants and old persons.

The terms '*sarvagadāpahaḥ*' and "*sarvān vikārān śamayet*" have identical implications, viz., curing all the diseases. The former, however, implies that *nirūha* type of medicated enema cures all the diseases by *saṃśamana* or alleviation of *doṣas*, and the latter implies that this cures all the diseases by *saṃśodhana* or elimination of *doṣas*. Thus, these are not to be construed as repetitions. Alternatively, the former term '*sarvagadāpahaḥ*' implies : *nirūha* cures all diseases, and the latter term "*sarvān vikārān śamayet*" implies : "*nirūha* cures all the stages of diseases".

Effects of Anuvāsana-basti

देहे निरूहेण विशुद्धमार्गे संस्नेहनं वर्णबलप्रदं च।
न तैलदानात् परमस्ति किञ्चिद् द्रव्यं विशेषेण समीरणार्ते।। २९।।
स्नेहेन रौक्ष्यं लघुतां गुरुत्वादौष्ण्याच्च शैत्यं पवनस्य हत्वा।
तैलं ददात्याशु मनःप्रसादं वीर्यं बलं वर्णमथाग्निपुष्टिम्।। ३०।।
मूले निषिक्तो हि यथा द्रुमः स्यान्नीलच्छदः कोमलपल्लवाग्रचः।
काले महान् पुष्पफलप्रदश्च तथा नरः स्यादनुवासनेन।। ३१।।

The channels of the body get cleansed by *nirūha*. Administration of *saṃsnehana* or unctuous (*anuvāsana*) type of medicated enema to such a person promotes his complexion and strength. There is no therapy better than the administration of oil (*anuvāsana-basti*) which is specifically useful for the patient afflicted with diseases caused by *vāyu*.

The oil by its unctuousness, heaviness and heating property counteracts the ununctuousness, lightness and cooling

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attributes of *vāyu* respectively. Because of this, administration of oil (*anuvāsana-basti*) instantaneously produces clarity of mind, and promotes energy, strength, complexion and *agni* (power of digestion and metabolism). Just as a tree irrigated with water at the root produces blue leaves, becomes beautiful with tender leaves, and during the course of time grows to produce flowers and fruits, similarly, a person becomes [young and beautiful with procreative power] by the administration of *anuvāsana* or unctuous type of medicated enema. [29 - 31]

Nirūha-basti helps in the cleansing of the channels of circulation. *Anuvāsana-basti* while moving through these cleansed channels produces the above mentioned effects.

Since ghee is considered to be the best among the different types of fat, the term '*taila*' (lit. meaning oil) is interpreted by some scholars as 'ghee' unctuousness being common to both of them. But in the present context, the term '*taila*' should be interpreted (according to its literal meaning) as 'oil', because it is the best among the fats to alleviate *vāyu*. In addition, the heating property attributed to *taila* in the above text is not available in ghee. All types of fat excluding *majjā* (bone-marrow) are no doubt, described to be useful for *anuvāsana* type of medicated enema. But, for this, ghee is not the most important type of fat. Therefore, interpretation of the term '*taila*' as ghee is not appropriate.

Only cooked (boiled) oil is to be used for *anuvāsana* therapy because the use of uncooked oil for this therapy is prohibited (vide *Siddhi* 4 : 48).

By the union of the opposite attributes of oil and *vāyu* (as described in the text) the latter gets overcome by the former, and not vice versa because of *prabhāva* (specific action) of the *dravya* or matter, i.e. oil.

Apart from the opposite attributes described above, the attribute *aṇutva* (subtlety) is shared both by the oil and *vāyu*. But this enables the oil to permeate through the subtle channels of the body to overcome *vāta*. Thus, though not exactly opposite, this *aṇutva* attribute actually serves the purpose of the opposite attribute (*viruddhārthakāri*).

Citation of the simile of *mūla* (root) in the above text implies that the anus is the *mūla* or the basic organ through which the entire body could be nourished by the administration of *anuvāsana-basti*. It is stated

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in *Parāśara-saṃhitā*, "Anus is the root of the body, and through the vessels located there the entire body upto the head gets nourishment. Like the tree whose root is sprinkled with water, *anuvāsana-basti* administered through the anus makes a person strong and beautiful, and he gets endowed with offsprings.

Effects of Nirūha and Anuvāsana in General

स्तब्धाश्च ये सङ्कुचिताश्च येऽपि ये पङ्गवो येऽपि च भग्नरुग्णाः।
येषां च शाखासु चरन्ति वाताः शस्तो विशेषेण हि तेषु बस्तिः।। ३२।।
आध्मापने विग्रथिते पुरीषे शूले च भक्तानभिनन्दने च।
एवंप्रकाराश्च भवन्ति कुक्षौ ये चामयास्तेषु च बस्तिरिष्टः।। ३३।।
याश्च स्त्रियो वातकृतोपसर्गा गर्भं न गृह्णन्ति नृभिः समेताः।
क्षीणेन्द्रिया ये च नराः कृशाश्च बस्तिः प्रशस्तः परमं च तेषु।। ३४।।

Basti or medicated enema is specially useful for the following types of persons :

(1) Whose limbs have become stiff and contracted;

(2) Who suffer from lameness;

(3) Who are afflicted with fractures and dislocations (*rugṇa*); and

(4) Whole limbs are afflicted by the movement of different types of aggravated *vāyu*.

Basti is also useful for the treatment of the following ailments :

(1) Distension of the abdomen by air;

(2) Scybalous stool;

(3) Colic pain;

(4) Disliking for food; and

(5) Such other ailments affecting the pelvic region.

Basti is an excellent therapy for women who are afflicted with the complications of *vāyu*, and who are unable to conceive despite their mating with male partners. It is also extremely useful for men having seminal debility and emaciation of the body. [32 - 34]

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In the above text, the common (general) effects of both *nirūha* and *anuvāsana* types of *basti* are described. As a general rule, when an aliment is caused by *vāyu* without the association of *āma*, then *anuvāsana* type of *basti* should be given. In the case of others (associated with *āma*), like *bhaktānabhinandana* (disliking for food) *nirūha* type of *basti* should be given.

Selection of Basti for Different Types of Patients

उष्णाभिभूतेषु वदन्ति शीताञ्छीताभिभूतेषु तथा सुखोष्णान्।
तत्प्रत्यनीकौषधसंप्रयुक्तान् सर्वत्र बस्तीन् प्रविभज्य युञ्ज्यात्।। ३५।।

According to experts, [in the administration of *pañca-karma* therapy] cooling *basti* (medicated enema) should be given to the patients suffering from diseases caused by hot ingredients, and luke-warm *basti* should be given to the patients suffering from diseases caused by cooling ingredients.

In all cases, different types of *basti* containing ingredients having attributes opposite to the attributes of the etiological factors of diseases should be administered. [35]

Apart from the cooling and heating nature, other attributes like unctuousness, ununctuousness, heaviness, lightness, etc., of the causative factors of diseases should be determined, and appropriate *basti* having ingredients of opposite attributes should be given to the patient.

Contra-indications for Anuvāsana-basti

न बृंहणीयान् विदधीत बस्तीन् विशोधनीयेषु गदेषु वैद्यः।
कुष्ठप्रमेहादिषु मेदुरेषु नरेषु ये चापि विशोधनीयाः।। ३६।।

To the patients needing [depleting type of] elimination therapy, roborant (*bṛṃhaṇīya* or *anuvāsana*) type of *basti* should not be given. Patients suffering from diseases like *kuṣṭha* (obstinate skin diseases including leprosy) and *prameha* (obstinate urinary diseases including diabetes), and those having adiposity need elimination therapy which is depleting. [To such patients, roborant (*bṛṃhaṇīya*) type of *basti* should not be given.] [36]

In addition to *kuṣṭha* and *prameha*, patients suffering from *arocaka* (anorexia), *tandrā* (drowsiness), *śīpada* (elephantiasis), etc., also need

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elimination therapy which is depleting in nature. To such patients, roborant *(bṛṃhaṇīya)* type of *basti* should not be given.

Contra-indications for Nirūha-basti

क्षीणक्षतानां न विशोधनीयान्न शोषिणां नो भृशदुर्बलानाम्।
न मूर्च्छितानां न विशोधितानां येषां च दोषेषु निबद्धमायुः।। ३७।।

Nirūha or evacuative type of *basti* should not be given to patients suffering from *kṣata-kṣīṇa* (pthisis), *śoṣa* (consumption), extreme debility and *mūrcchā* (fainting), and to those who have already undergone the process of purification, and to those whose life is dependant upon the holding up of *doṣas* (morbid matter). [37]

The life of some patients is sustained only by the holding up of morbid matter in the body. If evacuative type of elimination therapy is administered to such patients, then this leads to their instant death.

Importance of Basti Therapy

शाखागताः कोष्ठगताश्च रोगा मर्मोर्ध्वसर्वावयवाङ्गजाश्च।
ये सन्ति तेषां न हि कश्चिदन्यो वायोः परं जन्मनि हेतुरस्ति।। ३८।।
विण्मूत्रपित्तादिमलाशयानां विक्षेपसंघातकरः स यस्मात्।
तस्यातिवृद्धस्य शमाय नान्यद्बस्तिं विना भेषजमस्ति किञ्चित्।। ३९।।
तस्माच्चिकित्सार्धमिति ब्रुवन्ति सर्वां चिकित्सामपि बस्तिमेके।

There is none other than *vāyu* which is the most important causative factor of diseases in *śākhā* (peripheral tissue elements), *koṣṭha* (visceras of the thorax and abdomen), *marma* (vital spots including joints), *ūrdhva* (upper part of the body), *sarvāvayava* (covering the entire body) and *aṅga* (individual parts of the body).

Vāyu is responsible for the separation (*vikṣepa* = *vibhāga*) and combination (*saṅghāta* = *saṃyoga*) of stool, urine, *pitta*, (*kapha*) including other excreta and tissue elements [*āśaya* : normally meaning receptacle, which has been interpreted by Cakrapāṇi as tissue elements]. When it gets exceedingly aggravated there is no remedy other than *basti* for its alleviation.

Therefore, *basti* is considered by physicians to be half of

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the entire therapeutic measures. Some physician even go to the extent of suggesting that *basti* represents (not half but) the whole of therapeutic measures. [38 - $^{2}/_{4}$ 40]

Since *vāyu* is responsible for the separation and union of *doṣas*, *malas* (waste products) and *dhātus*, it is considered to be the causative factor of all diseases. [Cakrapāṇi in this context has interpreted the term '*āśaya*' as *dhātus* or tissue elements]. Alternatively, if the term '*āśaya*' is to be interpreted in its generic sense, i.e., 'receptacle', then this is to be treated as a suffix to each of the terms described earlier, viz., *viṭ* (stool), etc. *Sthāna* (receptacle) also implies *sthānin* (ingredients contained in them). Thus, affliction of stool, etc., are implied in the above statement.

Basti is already described to be the best therapy to subdue the aggravated *vāyu* (vide *Sūtra* 25 : 40).

Definition of Basti

नाभिप्रदेशं कटिपार्श्वकुक्षिं गत्वा शकृद्दोषचयं विलोड्य।। ४०।।
संस्नेह्य कायं सपुरीषदोषः सम्यक् सुखेनैति चयः स बस्तिः।

The therapy which while moving in the umbilical region, lumber region, sides of the chest and pelvic region churns up the stool including all the other morbid matter located there, and appropriately eliminates them (stool and other morbid material) with ease after nourishing (lit. oleating) the body is called *basti*. [40 $^{2}/_{4}$ - $^{2}/_{4}$ 41]

The term '*saṃsnehya*' in the present context implies '*sāra*' or nourishment. According to *Suśruta-saṃhitā*, *basti* provides nourishment to the entire body while drawing out stool and other morbid material (vide *Suśruta* : *Cikitsā* 35 : 27). The term '*sneha*' is also used for nourishment in the present work (vide *Cikitsā* 8 : 25).

Signs of Appropriately Administered Nirūha-basti

प्रसृष्टविण्मूत्रसमीरणत्वं रुच्यग्निवृद्ध्याशयलाघवानि ।। ४१।।
रोगोपशान्तिः प्रकृतिस्थता च बलं च तत् स्यात् सुनिरूढलिङ्गम्।

The following signs are manifested if *nirūha-basti* is appropriately administered :

(1) Appropriate elimination of stool, urine and flatus;

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(2) Promotion of appetite and *agni* (power of digestion and metabolism);

(3) Lightness of the *āśaya* (lit. receptacle; tissue elements according to the earlier commentary of Cakrapāṇi);

(4) Alleviation of diseases; and

(5) Restoration of natural health and strength.

[41 2/4 - 2/4 42]

The term '*āśaya-lāghavāni*' has a variant reading as '*āmaya-lāghavāni*'. If the latter reading is accepted, then it implies the reduction of the intensity of the disease. In that case, the term '*rogopaśānti*' will have to be interpreted as complete eradication of diseases curable by *nirūha* type of *basti* therapy.

Signs of Improperly Administered Nirūha-basti

स्याद्वुक्छिरोहृद्गुदबस्तिलिङ्गे शोफः प्रतिश्यायविकर्तिके च।। ४२।।
हृल्लासिका मारुतमूत्रसङ्गः श्वासो न सम्यक् च निरूहिते स्युः।

If the *nirūha* or evacuative type of medicated enema is inappropriately administered (i.e. administered in a smaller dose), then this gives rise to the following signs and symptoms:

(1) Pain in the head, cardiac region, anal region, urinary bladder and genital organ;

(2) Oedema, coryza, griping pain and nausea;

(3) Retention of flatus and urine; and

(4) Dyspnoea. [42 2/4 - 2/4 43]

Signs and Symptoms of Nirūha-basti Excessively Administered

लिङ्गं यदेवातिविरेचितस्य भवेत्तदेवातिनिरूहितस्य।। ४३।।

The signs and symptoms of *nirūha-basti* or evacuative type of medicated enema when used in excess quantity are the same as those caused by the excessive administration of purgation therapy (vide verse no. 19 2/4 - 2/4 20). [43 2/4]

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Signs and Symptoms of Properly Administered Anuvāsana-basti

प्रत्येत्यसक्तं सशकृच्च तैलं रक्तादिबुद्धीन्द्रियसंप्रसादः।
स्वप्नानुवृत्तिर्लघुता बलं च सृष्टाश्च वेगाः स्वनुवासिते स्युः।। ४४।।

Proper administration of *anuvāsana-basti* or unctuous type of medicated enema gives rise to the signs and symptoms as follows :

(1) Return of the recipe containing oil, etc., with fecal matter without any obstruction;

(2) Purity of the tissue elements, viz., blood, etc.;

(3) Clarity of intellect and senses;

(4) Good and continuous sleep;

(5) Lightness and strength in the body; and

(6) Proper manifestation of natural urges without any obstruction. [44]

Signs and Symptoms of Improperly Administered Anuvāsana-basti

अधःशरीरोदरबाहुपृष्ठ-पार्श्वेषु रुग्रूक्षखरं च गात्रम्।
ग्रहश्च विण्मूत्रसमीरणानामसम्यगेतान्यनुवासितस्य।। ४५।।

Improper administration of *anuvāsana-basti* or unctuous type of medicated enema gives rise to signs and symptoms as follows :

(1) Pain in the lower part of the body, abdomen, arms, back and sides of the chest;

(2) Ununctuousness and roughness of the body; and

(3) Obstruction in the passage of stool, urine and flatus. [45]

Signs and Symptoms of Excessively Administered Anuvāsana-basti

हल्लासमोहक्लमसादमूर्च्छा विकर्तिका चात्यनुवासितस्य।

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Excessive administration of *anuvāsana-basti* or unctuous type of medicated enema gives rise to nausea, unconsciousness, mental fatigue (*klama*), exhaustion, fainting and griping pain. [$^{2}/_{4}$ 46]

Duration of Retaining Anuvāsana-basti

यस्येह यामाननुवर्तते त्रीन् स्नेहो नरः स्यात् स विशुद्धदेहः।। ४६।।
आश्वागतेऽन्यस्तु पुनर्विधेयः स्नेहो न संस्नेहयति ह्यतिष्ठन्।

If the unctuous material administered for *anuvāsana-basti* is retained for three *yāmas* (nine hours) then the body of the person gets cleansed of morbid material. If it comes out quickly (before nine hours) then another *anuvāsana-basti* or unctuous type of medicated enema should be administered. If the unctuous material is not appropriately retained (in the rectum) then appropriate unctuous effect is not produced in the body of the person. [46 $^{2}/_{4}$ - $^{2}/_{4}$ 47]

Different Types of Basti Therapy

त्रिंशन्मताः कर्म नु बस्तयो हि कालस्ततोऽर्धेन ततश्च योगः।। ४७।।
सान्वासना द्वादश वै निरूहाः प्राक् स्नेह एकः परतश्च पञ्च।
काले त्रयोऽन्ते पुरतस्तथैकः स्नेहा निरूहान्तरिताश्च षट् स्युः।। ४८।।
योगे निरूहास्त्रय एव देयाः स्नेहाश्च पञ्चैव परादिमध्याः।

In *karma(n)* type, thirty *bastis* or enema are administered. In *kāla* type of *basti* therapy, the number of enema should be half of the former [as explained in the commentary it should be sixteen in number, and not fifteen]. In the *yoga* type of *basti* therapy, the number of enema to be given should be half of the former [it should be eight according to Cakrapāṇi.]

In *karma-basti,* twelve *anuvāsanas* (unctuous type of enema) and twelve *nirūhas* (evacuative type of enema) should be administered, one alternating with the other. Before this, one *anuvāsana-basti* in the beginning, and at the end, five *anuvāsana-bastis* should be administered for the purpose of oleation. [Thus, in total, thirty *bastis* are to be given in respect of *karma(n)* type.]

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In *kāla-basti*, six *anuvāsanas* and six *nirūhas* should be given one alternating with the other. Before this, in the beginning, one *anuvāsana-basti*, and at the end, three *anuvāsanas* should be given for the purpose of oleation. [Thus, in total, sixteen *bastis* are to be given in *kāla* type.]

In *yoga-basti*, three *nirūha-bastis* are to be given. In the beginning, in the middle and at the end, five *anuvāsana-bastis* are to be given. [Thus, in this type, eight *bastis* in total are to be given.] [47 $^{2}/_{4}$ - $^{2}/_{4}$ 49]

In the above text, the number of *kāla-basti* is described to be half (*ardha*) of the number of *karma-basti*. Since the number of *karma-basti* is thirty, the number of *kāla-basti* should have been fifteen. But in the present context, the term '*ardha*' does not imply just half [but near about half]. Therefore, the number of *kāla-bastis* should be sixteen.

Regarding *yoga-basti*, five *anuvāsana-bastis* are stated to be given in the beginning, in the middle and at the end of *nirūha-basti*. Two of these *anuvāsana-bastis* are to be given before *nirūha*, two after *nirūha*, and one in the middle of three *nirūhas*. According to some physicians, *anuvāsana-basti* is to be given in the afternoon of the day of the *nirūha-basti* (which latter is given in the morning). According to them, one day and one day after *nirūha-basti*, *anuvāsana-basti* is to be given. In addition, in each of three days of *nirūha*, *anuvāsana* is to be given in the afternoon. Thus, there will be three *nirūha-bastis* and five *anuvāsana-bastis*, making the total number to eight. Similarly, in *karma*(n) and *kāla-bastis*, *anuvāsana* can be given in the afternoon of the day of *nirūha* or on the next day.

Giving *anuvāsana* one day after the administration of *nirūha* does not lead to aggravation of *vāyu* because the recipe of *nirūha* is partially unctuous in nature; it is used in the form of *yāpanā-basti*, i.e. retaintive enema.

Eventhough terms like '*karma-basti*, *kāla-basti* and *yoga-basti* are not used elsewhere in this text, some physicians consider this text to be unauthentic. But it is not correct. There are other terms like '*yamaka*', '*mahā-sneha*' and '*accha-pāna*' which are also very rarely used. Mention of these terms in the text is meant for use by the specialists of these therapies. For the same purpose, these terms are also used in other texts like *Hārīta-saṃhitā* and *Jatūkarṇa-saṃhitā*.

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Some scholars hold the view that *karma*, *kāla* and *yoga bastis* are meant to be used for diseases caused by *vāyu*, *pitta* and *kapha* respectively.

Number of Anuvāsana-basti for Oleation

त्रीन् पञ्च वाऽऽहुश्चतुरोऽथ षड् वा वातादिकानामनुवासनीयान्।। ४९।।
स्नेहान् प्रदायाशु भिषग्विदध्यात् स्त्रोतोविशुद्ध्यर्थमतो निरूहान्।

Some hold the view that after giving three, five, four or six *anuvāsana-bastis* for the purpose of oleation, to patients suffering from diseases caused by *vāyu* (*pitta* and *kapha*) the physician should thereafter, administer *nirūha-basti* for the cleansing of the [obstructed] *srotas* or channels of circulation.

[$49^{2}/_{4}$ - $^{2}/_{4}$ 50]

Use of the term '*vātādikānām*' in plural is grammatically correct inasmuch as it represents the *tadguṇa-saṃvijñāna* form of *bahuvrīhi* compound. Similarly, usage in plural is also found in *Nidāna* 5 : 5 [Cakrapāṇi has quoted the reading as "*vātādiṣu praduṣteṣu*" whereas in the text the reading is "*vātādiṣu triṣu prakupiteṣu*"] and in *Sūtra* 17 : 63.

In the place of '*vātādikānām*' there is also a variant reading as '*vātādhikānām*'.

In the above text, *anuvāsana-basti* is stated to be given also in even numbers, viz., four and six. Since *anuvāsana* is described here to be given for oleation as a preparatory therapy for *nirūha*, it does not contradict the earlier statement in verso no. 25 where the main *basti* is described to be given only in odd numbers. The object of the former is different from the latter.

Alternately, this statement can be explained in a different way to represent the odd numbers inasmuch as the statement represents five groups of *basti*, viz., three, five, seven (three plus four), nine (five plus four) and eleven (five plus six). However, in other texts, giving *basti* in even numbers is also provided (vide *Suśruta* : *Sūtra* 37 : 44).

Śiro-virecana or Errhine Therapy

विशुद्धदेहस्य ततः क्रमेण स्निग्धं तलस्वेदितमुत्तमाङ्गम्।। ५०।।
विरेचयेत्त्रिर्द्विरथैकशो वा बलं समीक्ष्य त्रिविधं मलानाम्।

When the body of the patient is cleansed, his head should be consecutively anointed and fomented with the help of the palm. After ascertaining the strength of the three types of

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doṣas, he should be given errhine therapy, once, twice or thrice. [50 $^{2}/_{4}$ - $^{2}/_{4}$ 51]

The *śiro-virecana* (errhine) therapy is suggested above to be given to a person whose body is cleansed (*viśuddha-dehasya*) by the administration of therapies described earlier. It can also be given to a person who has not undergone such purificatory therapies. Before the administration of errhine therapy, the head of the person should be oleated by massage or *śiro-basti* (keeping oil in a cap over the head). The head should be fomented with the help of warm palm. Errhine therapy can be given thrice, twice or once on the same day depending upon excessively, moderately or mildly aggravated *doṣas* respectively.

Signs and Symptoms of Appropriately Administered Errhine Therapy

उरःशिरोलाघवमिन्द्रियाच्छचं स्त्रोतोविशुद्धिश्च भवेद्विशुद्धे।। ५१।।

Appropriately administered *śiro-virecana* (errhine) therapy gives rise to lightening of the chest and head, clarity of the senses and cleansing of the *srotas* (channels of circulation). [51 $^{2}/_{4}$]

Signs and Symptoms of Inappropriately Administered Errhine Therapy

गलोपलेपः शिरसो गुरुत्वं निष्ठीवनं चाप्यथ दुर्विरिक्ते।

Inappropriate administration of errhine therapy gives rise to adhesion of sticky material in the throat, heaviness of the head and ptyalism. [$^{2}/_{4}$ 52]

Signs and Symptoms of Excessively Administered Errhine Therapy

शिरोक्षिशङ्खश्रवणार्तितोदावत्यर्थशुद्धे तिमिरं च पश्येत्।। ५२।।

Excessive administration of errhine therapy gives rise to cutting and aching pain in head, eyes, temples and ears, and fainting. [52 $^{2}/_{4}$]

Management of Conditions Arising Out of Excessive and Inappropriate Administration of Errhine Therapy

स्यात्तर्पणं तत्र मृदु द्रवं च स्निग्धस्य तीक्ष्णं तु पुनर्न योगे।

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For the management of conditions arising out of excessively administered errhine therapy, the patient should be given demulcent drinks and medications which are soft and liquid in nature.

For the management of conditions arising out of inappropriate administration of errhine therapy, the patient should be given oleation therapy, and thereafter, sharp type of errhine therapy should be given to the patient. [$^{2}/_{4}$ 53]

Utility of Pañca-karma Therapy

इत्यातुरस्वस्थसुखः प्रयोगो बलायुषोर्वृद्धिकृदामयघ्नः।। ५३।।

Pañca-karma (five purificatory therapies) described above bestow happiness to both the patients and healthy persons by promoting their strength and longevity, and also by curing their diseases. [53 $^{2}/_{4}$]

Panca-karma therapy is useful both for healthy persons and patients. It promotes strength and longevity of healthy persons, and in patients it cures diseases.

Pañca-karma therapy for healthy persons is already described (vide *Sūtra* 7 : 46).

Interval Period Between Two Courses of Therapy

कालस्तु बस्त्यादिषु याति यावांस्तावान् भवेद् द्विः परिहारकालः।

The interval between two courses of *basti* (including emetic, purgation and errhine) therapies should be double the period for which these therapies were originally administered. [$^{2}/_{4}$ 54]

The term '*bastyādi*' meaning *basti*, etc., includes other *pañca-karma* therapies, viz., emesis, purgation and *śiro-virecana* (errhine) therapies. *Basti* is specified in the text because of its importance.

Prohibitions During Pañca-karma Therapies

अत्यासनस्थानवचांसि यानं स्वप्नं दिवा मैथुनवेगरोधान्।। ५४।।
शीतोपचारातपशोकरोषांस्त्यजेदकालाहितभोजनं च।

While undergoing *pañca-karma* therapies, the patient should avoid the following :

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(1) Excessive sitting, standing, speaking and riding (over vehicles and horses);

(2) Sleep during day time;

(3) Sexual intercourse;

(4) Suppression of the manifested natural urges;

(5) Cooling regimens;

(6) Exposure to hot sun;

(7) Grief and anger; and

(8) Intake of untimely and unwholesome food.

Prohibitions described above are the important ones. In addition, other regimens described in *Sūtra* 15 : 15 are also to be avoided.

Factors Inhibiting Recipes of Basti to Enter and Come out Smoothly

बद्धे प्रणीते विषमं च नेत्रे मार्गे तथार्शःकफविड्विबद्धे।। ५५।।
न याति बस्तिर्न सुखं निरेति दोषावृतोऽल्पो यदि वाऽल्पवीर्यः।

The recipe of *basti* does not reach its destination because of the following :

(1) If the nozzle is clogged or inserted obliquely; and

(2) If the rectal passage is blocked by piles, mucus or hard stool.

The recipe, after enema, does not come out with ease because of the following :

(1) If the path of the enema is obstructed by *doṣas*;

(2) If the recipe of enema is less in quantity; and

(3) If the recipe is of low potency. [55 $^{2}/_{4}$ - $^{2}/_{4}$ 56]

The recipe of enema becomes low in potency if it does not contain hot and saline ingredients in sufficient quantity.

Factors Responsible for Quicker Elimination of Enema

प्राप्ते तु वर्चोनिलमूत्रवेगे वातेऽतिवृद्धेऽल्पबले गुदे वा।। ५६।।
अत्युष्णतीक्ष्णश्च मृदौ च कोष्ठे प्रणीतमात्रः पुनरेति बस्तिः।

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The recipe of enema comes out through the anus immediately after it is administered because of the following :

(1) If there is sudden urge for voiding feces, flatus or urine;

(2) If there is excessive aggravation of *vāyu*;

(3) If there is lack of strength in the anal muscles to retain the recipe;

(4) If the recipe contains ingredients which are excessively hot and sharp; and

(5) If the person has laxed bowel (*mṛdu-koṣṭha*).

[$56^{2}/_{4}$ - $^{2}/_{4}$ 57]

There are three sphincters (*valīs*) in the anus. One of these is called *saṃvaraṇī*. If this sphincter is weak then the person becomes incapable of holding the enema for the appropriate period.

Incapability of Basti to Cure a Curable Disease

मेदःकफाभ्यामनिलो निरुद्धः शूलाङ्गसुप्तिश्वयथून् करोति।। ५७।।
स्नेहं तु युञ्जन्नबुधस्तु तस्मै संवर्धयत्येव हि तान् विकारान्।
रोगास्तथाऽन्येऽप्यवितर्क्यमाणाः परस्परेणावगृहीतमार्गाः।। ५८।।
संदूषिता धातुभिरेव चान्यैः स्वैर्भेषजैर्नोपशमं व्रजन्ति।

If the *vāyu* gets occluded by *medas* (fat) and *kapha*, then it gives rise to colic pain, numbness of the body and oedema. When an ignorant physician administers *sneha* (unctuous recipe in order to alleviate these ailments) then they actually get aggravated. Similarly, other *doṣas* [the term '*roga*' in the text does not refer to 'disease' but to '*doṣas*'] overlap each other in their courses (pathways) and get afflicted with tissue elements of different nature. If not properly determined (diagnosed), these ailments do not get alleviated eventhough specific remedies are administered. [$57^{2}/_{4}$ - $^{2}/_{4}$ 59]

When a person suffers from colic pain, etc., because of the occlusion of *vāyu* by *medas* (fat) and *kapha*, the unwise physician wrongly diagnoses them to be caused by *vāyu* alone or pure *vāyu*. As a result of this, giving oleation therapy to alleviate this *vāyu* actually

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works in the opposite way, i.e. instead of alleviating *vāyu*, this unctuous therapy actually aggravates fat and *kapha* as a result of which the ailment gets aggravated.

When *doṣas* overlap each other, and get afflicted by tissue elements, ignorant physicians fail to diagnose the ailments caused by them properly, and administer medicines on the basis of symptoms only. Such medicines do not help in curing the disease. Therefore, occlusion of one *doṣa* by the other, and affliction of tissue elements should be correctly ascertained before initiating treatment.

Reasons for Failure in Treatment

सर्वं च रोगप्रशमाय कर्म हीनातिमात्रं विपरीतकालम्।। ५९।।
मिथ्योपचाराच्च न तं विकारं शान्तिं नयेत् पथ्यमपि प्रयुक्तम्।

All therapeutic measures administered to alleviate a disease eventhough wholesome and skilfully given, fail to cure it, if they are used in lesser or excessive dose or at wrong time or in wrong manner. [59 $^{2}/_{4}$ - $^{2}/_{4}$ 60]

If appropriate therapy is administered in appropriate manner then it certainly cures the disease.

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तत्र श्लोकः–
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To sum up :

Lord Ātreya, the foremost among the sages described the successful administration of *pañca-karma* (five purificatory therapies) for the well-being of the people in the form of answer to the twelve queries (described in verse nos. 3-5). [60 $^{2}/_{4}$ - 61]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढबलसंपूरिते सिद्धिस्थाने कल्पनासिद्धिर्नाम प्रथमोऽध्यायः।। १।।

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Thus, ends the first chapter of *Siddhi*-section called "*Kalpanā-siddhi* (Successful Administration of Therapeutic Measures)" in the text of Agniveśa which was redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - II

द्वितीयोऽध्यायः

(DESCRIPTION OF INDICATIONS AND CONTRA-INDICATIONS FOR SUCCESSFUL ADMINISTRATION OF PAÑCA-KARMA THERAPY)

Prologue

अथातः पञ्चकर्मीयां सिद्धिं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

We shall now expound the chapter dealing with the "Indications and Contra-indications for Successful Administration of *Pañca-karma* Therapy".

Thus, said Lord Ātreya. [1-2]

In the previous chapter, different aspects of the successful administration of *pañca-karma* therapy were described. Naturally, there is a desire to know the indications and contra-indications of these therapies. The present chapter, therefore, describes these indications (*pravṛtti*) and contra-indications (*nivṛtti*) for successful treatment of ailments through these therapies.

Dialogue

येषां यस्मात् पञ्चकर्माण्यग्निवेश न कारयेत्।
येषां च कारयेत्तानि तत् सर्वं संप्रवक्ष्यते।।३।।

O ! Agniveśa, we shall now describe all the topics relating to the types of patients for whom *pañca-karma* therapies are contra-indicated, reasons for which these are contra-indicated, and for which type of patients these therapies are indicated. [3]

The contra-indications and indications mentioned above refer to all the five therapies taken together, and to each of these individual therapies.

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Persons for Whom All Pañca-karma Therapies are Prohibited

चण्डः साहसिको भीरुः कृतघ्नो व्यग्र एव च।
सद्राजभिषजां द्वेष्टा तद्द्विष्टः शोकपीडितः।। ४।।
यादृच्छिको मुमूर्षुश्च विहीनः करणैश्च यः।
वैरी वैद्यविदग्धश्च श्रद्धाहीनः सुशङ्कितः।। ५।।
भिषजामविधेयश्च नोपक्रम्या भिषग्विदा।
एतानुपचरन् वैद्यो बहून् दोषानवाप्नुयात्।। ६।।
एभ्योऽन्ये समुपक्रम्या नराः सर्वैरुपक्रमैः।
अवस्थां प्रविभज्यैषां वर्ज्यं कार्यं च वक्ष्यते।। ७।।

The wise physician should not give *pañca-karma* therapies to the following types of patients :

(1) Who is fierceful, rashful, cowardly, ungrateful and fickle minded;

(2) Who hates good persons, kings and physicians, and who is hated by them;

(3) Who is afflicted with grief;

(4) Who does not believe in God (*yādṛcchika = nāstika*);

(5) Who is in the terminal stage of the disease, and destined to die;

(6) Who is unable to arrange the essential items (*karaṇa*) for the treatment;

(7) Who is inimical to the physician;

(8) Who is an imposter and considers himself to be a physician;

(9) Who is devoid of faith in the physician;

(10) Who is sceptic; and

(11) Who does not carry out the instructions of the physician.

The physician who administers *pañca-karma* therapy to the above mentioned types of patients invites many difficulties upon himself.

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Persons other than those mentioned above should be treated with all the different types of *pañca-karma* therapies.

Hereafter, we shall explain the indications and contra-indications of each of the different types of *pañca-karma* therapies. [4 - 7]

Suitability and unsuitability of patients for treatment are already described in *Vimāna* 3 : 45 and *Vimāna* 8 : 13. Because of contextual propriety, these indications and contra-indications are being elaborated here again.

Treatment of fierceful and such other persons is contra-indicated because in such patients the therapies do not produce the desired effects. Similarly, therapies do not produce the desired effects in ungrateful and such other persons because of their sinful disposition. On the other hand, by the treatment of such sinful persons, the physician himself incurs the sin. Therefore, treatment of such persons is prohibited.

The term '*sadrājabhiṣajāṃ dveṣṭā*" can be interpreted in a different way as "the one who hates good kings and good physicians".

In the above verses, '*vairī*' (the one who is inimical to the physician) and '*vaidyadveṣṭā*' (the one who hates the physician)—these two types of persons are described as unsuitable for treatment. Though they have almost similar connotations in form, the former type of person tries to harm the physician while the latter does not do any harm.

The above mentioned persons should not be given any of the *pañca-karma* therapies, and also alleviation (*saṃśamana*) therapies.

Contra-indications of Emetic Therapies

अवम्यास्तावत्-क्षतक्षीणातिस्थूलातिकृशबालवृद्धदुर्बलश्रान्तपिपासित-क्षुधितकर्मभाराध्वहतोपवासमैथुनाध्ययनव्यायामचिन्ताप्रसक्तक्षामगर्भिणी-सुकुमारसंवृतकोष्ठदुश्छर्दनोर्ध्वरक्तपित्तप्रसक्तच्छर्दिरूर्ध्ववातास्थापितानुवा-सितहृद्रोगोदावर्तमूत्राघातप्लीहगुल्मोदराष्ठीलास्वरोपघाततिमिरशिरःशङ्ख-कर्णाक्षिशूलार्ताः ।। ८ ।।

Emetic therapy is contra-indicated for the following :

(1) The patient suffering from *kṣata* (phthisis);

(2) The patient who is *kṣīṇa* (suffering from consumption), *ati-sthūla* (excessively obese), *ati-*

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kṛśa (excessively emaciated), *bāla* (infant), *vṛddha* (old) and *durbala* (weak);

(3) One who is *śrānta* (fatigued), *pipāsita* (thirsty) and *kṣudhita* (hungry);

(4) One who is broken down (*hata*) because of hard work (*karma*), carrying heavy weight (*bhāra*) and long wayfaring (*adhva*);

(5) One who has become weak (*kṣāma*) by excessive (*prasakta*) fasting (*upavāsa*), sexual indulgence (*maithuna*), study (*adhyayana*), exercise (*vyāyāma*), and *cintā* (worry);

(6) Pregnant woman;

(7) *Sukumāra* (one having tender health);

(8) *Saṃvṛta-koṣṭha* (one whose gastro-intestinal tract is occluded by *vāyu*) and *duśchardana* (who does not respond to emetic therapy easily);

(9) *Ūrdhvaga-rakta-pitta* (one suffering from ailments characterised by bleeding from upward tract);

(10) *Prasakta-chardi* (one who is suffering from incessant vomiting);

(11) *Ūrdhva-vāta* (one who is suffering from upward movement of *vāyu* or wind);

(12) *Āsthāpita* (one who has taken evacuative type of medicated enema) and *anuvāsita* (one who has taken unctuous type of medicated enema);

(13) *Hṛd-roga* (one suffering from heart-diseases);

(14) *Udāvarta* (one suffering from misperistalsis);

(15) One suffering from *mūtrāghāta* (suppression of urination), *plīhan* (splenic disorder), *gulma* (phantom tumour), *udara* (obstinate abdominal diseases including ascites), *aṣṭhīlā* (enlarged prostate),

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svaropaghāta (choked voice) and *timira* (cataract); and

(16) One suffering from pain in the head, temporal region, ears and eyes. [8]

Complications Caused by Emetic Therapy Administered in Contra-indicated Conditions

तत्र क्षतस्य भूयः क्षणनाद्रक्तातिप्रवृत्तिः स्यात्, क्षीणातिस्थूलकृशबाल-वृद्धदुर्बलानामौषधबलासहत्वात् प्राणोपरोधः, श्रान्तपिपासितक्षुधितानां च तद्वत्, कर्मभाराध्वहतोपवासमैथुनाध्ययनव्यायामचिन्ताप्रसक्तक्षामाणां रौक्ष्या-द्वातरक्तच्छेदक्षतभयं स्यात्, गर्भिण्या गर्भव्यापदामगर्भभ्रंशाच्च दारुणा रोगप्राप्तिः, सुकुमारस्य हृदयापकर्षणादूर्ध्वमधो वा रुधिरातिप्रवृत्तिः, संवृतकोष्ठदुश्छर्दनयोरतिमात्रप्रवाहणाद्दोषाः समुत्क्लिष्टा अन्तःकोष्ठे जनयन्त्यन्तर्विसर्पं स्तम्भं जाडचं वैचित्त्यं मरणं वा, ऊर्ध्वगरक्तपित्तिन उदानमुत्क्षिप्य प्राणान् हरेद्रक्तं चातिप्रवर्तयेत्, प्रसक्तच्छर्देस्तद्वत्, ऊर्ध्व-वातास्थापितानुवासितानामूर्ध्वं वातातिप्रवृत्तिः, हृद्रोगिणो हृदयोपरोधः, उदावर्तिनो घोरतर उदावर्तः स्याच्छीघ्रतरहन्ता, मूत्राघातादिभिरार्तानां तीव्रतरशूलप्रादुर्भावः, तिमिरार्तानां तिमिरातिवृद्धिः, शिरःशूलादिषु शूलाति-वृद्धिः, तस्मादेते न वम्याः। सर्वेष्वपि तु खल्वेतेषु विषगरविरुद्धाजीर्णा-भ्यवहारामकृतेष्वप्रतिषिद्धं शीघ्रतरकारित्वादेषामिति।। ९।।

If a person suffering from *kṣata* (phthisis) is given emetic therapy, then it further aggravates the injury [to the lungs], and causes excessive hemoptysis.

If emetic therapy is given to a person who is *kṣīṇa* (suffering from consumption), *ati-sthūla* (excessively obese), *ati-kṛśa* (excessively emaciated), *bāla* (infant), *vṛddha* (old) and *durbala* (weak), then this endangers their life because such patients are incapable of tolerating the effects of drugs which are used for emesis.

Similar effect is produced when emetic therapy is administered to a person who is fatigued, thirsty and hungry.

If emetic therapy is administered to a person who is broken down by doing hard work, carrying excessive weight

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and long wayfaring, and who is weakened by incessant fasting, sexual indulgence, study, exercise and worry, then because of ununctuousness, the *vāyu* in his body gets aggravated. He may get haemorrhage or injury to his lungs.

If a pregnant woman is given emetic therapy, then this may give rise to complications of pregnancy and occurence of serious diseases because of the abortion of immature foetus.

If the person having tender health is given emetic therapy, then because of the strain in his heart, this may give rise to haemorrhage through the upward and downward tracts.

In the case of a person whose *koṣṭha* (gastro-intestinal tract) is occluded or who does not respond to emetic therapy easily, then the administration of this therapy leads to excessive bouts of urge for vomiting leading to the excitation of *doṣas* causing internal *visarpa* (erysipelas), *stambha* (stiffness), *jāḍya* (numbness), *vaicitya* (mental perversion) or death.

If emetic therapy is administered to a person suffering from *ūrdhvaga-rakta-pitta* (a disease characterised by bleeding from the upward tracts), then it provokes *udāna-vāyu* leading to death or excessive bleeding.

Similar effects are manifested if emetic therapy is administered to a person who is already suffering from incessant vomiting.

If the emetic therapy is administered to a person suffering from *ūrdhva-vāta* (upward movement of the wind), and who has already taken *āsthāpana* or *anuvāsana* types of medicated enema, then this causes upward movement of the wind in excess.

If emetic therapy is administered to a person suffering from heart-disease, then it leads to cardiac arrest.

If a person suffering from *udāvarta* (misperistalsis) is given emetic therapy, then this leads to severe misperistalsis

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which is of serious nature, and which results in quicker death of the patient.

Administration of emetic therapy to patients suffering from *mūtrāghāta* (suppression of urination), etc., leads to the manifestation of colic pain of more acute nature.

Administration of emetic therapy to a patient suffering from *timira* (cataract) leads to excessive increase of this ailment.

Aministration of emetic therapy to a patient suffering from headache, etc., leads to the excessive aggravation of pain.

Therefore, emetic therapy is contra-indicated for the above types of patients. However, administration of emetic therapy is not prohibited even in the above mentioned (contra-indicated) ailments if the person is suffering from *viṣa* (ailments caused by natural poisons), *gara* (ailments caused by artificially prepared poisons), *viruddhāhāra* (ailments caused by the intake of mutually contradictory ingredients), *ajīrṇa* (ailments caused by indigestion), *abhyavahāra* (ailments caused by the intake of food before the previous meal is digested) and *āma* (ailments caused by the product of improper digestion and metabolism), because these ailments produce their effects instantaneously. [9]

At the end of the chapter, it will be stated that a wise physician can administer *pañca-karma* therapies even for prohibited ailments. Even then, it is specified in the above text to administer emetic therapy in the case of poisoning, etc., to emphasise its essentiality.

Indications of Emetic Therapy

शेषास्तु वम्याः; विशेषतस्तु पीनसकुष्ठनवज्वरराजयक्ष्मकासश्वास-गलग्रहगलगण्डश्लीपदमेहमन्दाग्निविरुद्धाजीर्णान्नविसूचिकालसकविषगर-पीतदष्टदिग्धविद्धाधःशोणितपित्तप्रसेक(दुर्नाम)हल्लासारोचकाविपाकापच्यप-स्मारोन्मादातिसारशोफपाण्डुरोगमुखपाकदुष्टस्तन्यादयः श्लेष्मव्याधयो विशेषेण महारोगाध्यायोक्तश्च; एतेषु हि वमनं प्रधानतममित्युक्तं केदारसेतुभेदे शाल्याद्यशोषदोषविनाशवत्।। १०।।

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Emetic therapy is indicated for the remaining ailments specially for *pīnasa* (coryza), *kuṣṭha* (obstinate skin diseases including leprosy), *nava-jvara* (freshly occurring fever), *rāja-yakṣmā* (tuberculosis), *kāsa* (cough), *śvāsa* (asthma), *gala-graha* (spasm in the throat), *gala-gaṇḍa* (enlargement of thyroid gland), *ślīpada* (elephantiasis), *meha* (obstinate urinary disorders including diabetes), *mandāgni* (suppression of the power of digestion), *viruddhānna* (ailments caused by the intake of mutually contradictory food ingredients), *ajīrṇāanna* (ailments caused by indigestion of food), *visūcikā* (cholera), *alasaka* (intestinal torpor), *viṣa-pīta* (ailments caused by the intake of natural poisons), *gara-pīta* (ailments caused by the intake of artificially prepared poisons), *viṣa-daṣṭa* (poisonous bites), *viṣa-digdha-viddha* (ailments caused by injury with weapons smeared with poisonous material), *adhaḥ-śoṇita-pitta* (an ailment characterised by bleeding from downward tracts), *praseka* (ptyalism), *durnāma* (piles), *hṛllāsa* (nausea), *arocaka* (anorexia), *avipāka* (indigestion), *apacī* (cervical adenitis), *apasmāra* (epilepsy), *unmāda* (insanity), *atisāra* (diarrhoea), *śopha* (oedema), *pāṇḍu-roga* (anemia), *mukha-pāka* (stomatitis), *duṣṭa-stanya* (polluted breast-milk), etc.

The emetic therapy is specially useful for diseases caused by *kapha* which are described in *Sūtra* 20 : 17.

In all the above mentioned conditions, emesis is the best therapy. As paddy, etc., in a field full of water are likely to get spoiled, but an outlet made through its wall to take out water saves the crop, similarly, emetic therapy cures diseases caused by aggravated *kapha* by eliminating this *doṣa* from the body. [10]

The term "*śeṣāstu vamyāḥ*" in the above text implies that the remaining ailments not described in the para no. 8 are curable by emetic therapy. Even then some ailments are enumerated here in order to emphasis the fact that the emetic therapy is specially useful for the cure of these ailments.

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The modus oerandi of emetic therapy for curing diseases caused by *kapha*, described above, are to be augmented by adopting the measures as per the statement made in *Sūtra* 20 : 19. Similar augmentation of statements regarding the cure of *pitta*-diseases by purgation therapy, and *vāta*-diseases by *basti* therapy is to be made by incorporating statements made earlier in *Sūtra* 20 : 16 and *Sūtra* 20 : 13 respectively.

Contra-indications of Purgation Therapy

अविरेच्यास्तु सुभगक्षतगुदमुक्तनालाधोभागरक्तपित्तविलङ्घितदुर्बलेन्द्रियाल्पाग्निनिरूढकामादिव्यग्राजीर्णिनवज्वरिमदात्ययिताध्मातशल्यार्दिताभिहतातिस्निग्धरूक्षदारुणकोष्ठाः क्षतादयश्च गर्भिण्यन्ताः ।। ११ ।।

Purgation therapy is contra-indicated for the following :

(1) *Subhaga* (persons having tender health);

(2) *Kṣata-guda* (persons having anal injury);

(3) *Mukta-nāla* (prolapse rectum);

(4) *Adho-bhāga rakta-pitta* (an ailment characterised by bleeding through downward tracts);

(5) *Vilaṅghita* (person who is on fast);

(6) *Durbalendriya* (person having weak sensory and motor organs);

(7) *Alpāgni* (person having less power of digestion);

(8) *Nirūḍha* (person who has undergone evacuative type of enema therapy);

(9) *Kāmādi-vyagra-mānasa* (person whose mind is agitated by passion, etc.);

(10) *Ajīrṇi* (person who is suffering from indigestion);

(11) *Nava-jvari* (person suffering from fever of recent origin);

(12) *Madātyayita* (person suffering from alcoholism);

(13) *Ādhmāta* (person suffering from abdominal distension);

(14) *Śalyārdita* (person afflicted with foreign bodies);

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(15) *Abhihata* (person with bodily injury);

(16) *Ati-snigdha* (person who is over-unctuous);

(17) *Ati-rūkṣa* (person who is excessively ununctuous);

(18) *Dāruṇa-koṣṭha* (person having hard bowel); and

(19) Other persons having ailments beginning from *kṣata* (phthisis) and ending with *garbhiṇī* (pregnancy) as described in paragraph no. 8. [11]

[Cakrapāṇi has interpreted the term '*subhaga-kṣata-guda*" as "*subhaga-guda*" (one having tender anus) and "*kṣata-guda*" (one having anal injury). He has also referred to another opinion according to which this term implies '*subhaga*' (one having tender health) and "*kṣata-guda*" (one having anal injury). This latter interpretation appears more appropriate as the description in the next paragraph reveals; hence, we have followed the same in our translation.]

Adverse Effects of Purgation Therapy Administered in Contra-indicated Conditions

तत्र सुभगस्य सुकुमारोक्तो दोषः स्यात्, क्षतगुदस्य क्षते गुदे प्राणोपरोधकरीं रुजां जनयेत्, मुक्तनालमतिप्रवृत्त्या हन्यात्, अधोभागरक्तपित्तिनं तद्वत्, विलङ्घितदुर्बलेन्द्रियाल्पाग्निनिरूढा औषधवेगं न सहेरन्, कामादिव्यग्रमनसो न प्रवर्तते कृच्छ्रेण वा प्रवर्तमानमयोगदोषान् कुर्यात्, अजीर्णिन आमदोषः स्यात्, नवज्वरिणोऽविपक्वान् दोषान् न निर्हरेद् वातमेव च कोपयेत्, मदात्ययितस्य मद्यक्षीणे देहे वायुः प्राणोपरोधं कुर्यात्, आध्मातस्याधमतो वा पुरीषकोष्ठे निचितो वायुर्विसर्पन् सहसाऽऽनाहं तीव्रतरं मरणं वा जनयेत्, शल्यार्दिताभिहतयोः क्षते वायुराश्रितो जीवितं हिंस्यात्, अतिस्निग्धस्यातियोगभयं भवेत्, रूक्षस्य वायुरङ्गप्रग्रहं कुर्यात्, दारुणकोष्ठस्य विरेचनोद्धता दोषा हृच्छूलपर्वभेदानाहाङ्गमर्दच्छर्दिमूर्च्छाक्लमाञ्जनयित्वा प्राणान् हन्युः, क्षतादीनां गर्भिण्यन्तानां छर्दनोक्तो दोषः स्यात्; तस्मादेते न विरेच्याः।। १२।।

If purgation therapy is given to a person who is *subhaga* (having tender health), then he will suffer from the same disorders as described for emetic therapy administered to *sukumāra* (person having tender health) in para no. 9.

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If purgation therapy is administered to a person having anal injury, then it gives rise to distressing pain in the injured anus which may cause danger to his life.

If purgation therapy is administered to a person having prolapsed rectum, then it may kill the person because of excessive prolapse.

If purgation therapy is given to a person suffering from *adho-bhāga-rakta-pitta* (an ailment characterised by bleeding through the downward tract), it may also similarly endanger his life.

A person who has kept fast, who has weak senses, who has less power of digestion or who has undergone evacuative type of medicated enema, becomes incapable of tolerating the effects of purgative medicines.

If purgation therapy is administered to a person whose mind is agitated by passion, etc., then there will be either no purgation or purgation with difficulty. In such cases, there will be harmful effects because of the improper administration of purgation therapy.

If purgation therapy is administered to a person suffering from indigestion, then it leads to ailments caused by *āma* (product of improper digestion and metabolism).

If purgation therapy is administered to a patient suffering from fever of recent origin, then it does not eliminate the immature toxic products, and causes aggravation of *vāyu*.

In a person suffering from alcoholism, purgation therapy causes aggravation of *vāyu* because his body is already emaciated as a result of the intake of alcohol, and this endangers his life.

If purgation therapy is administered to a person having abdominal distension, then the *vāyu* accumulated in the part of the intestinal tract containing stool causes further distension,

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and spreads to cause serious type of meteorism instantaneously. This may cause death of the patient.

In a person afflicted with foreign body or injured by weapons, purgation therapy makes the *vāyu* to get localised in the injured part leading to his death.

If purgation therapy is given to a patient who is excessively oleated, then it may lead to overaction of the therapy.

If purgation therapy is given to a patient who is ununctuous, then this leads to spasticity of the limbs because of aggravated *vāyu*.

Purgative therapy given to a person having costive bowel causes excitement of *doṣas* which leads to cardiac pain, joint pain, meteorism, malaise, vomiting, fainting and mental fatigue. These may ultimately lead to the death of the patient.

Purgation therapy given to persons suffering from ailments beginning with *kṣata* (phthisis) and ending with pregnancy produces the same complications as described for emetic therapy when administered to such cases (vide para no. 9).

Therefore, purgation therapy is contra-indicated in the above mentioned cases. [12]

Administration of purgation therapy to a person agitated by passion, grief, anger, etc., leads to *ayoga* (inappropriate) effects which includes movement of the recipe in reverse direction, i.e. causing emesis, absence of purgation or less purgation (vide *Siddhi* 6 : 31). Because of *ayoga*, there may be perverted effects like hiccup, stiffness, etc.

Indications of Purgation Therapy

शेषास्तु विरेच्याः, विशेषतस्तु कुष्ठज्वरमेहोर्ध्वरक्तपित्तभगन्दरोदरार्शोब्रध्नप्लीहगुल्मार्बुदगलगण्डग्रन्थिविसूचिकालसकमूत्राघातक्रिमिकोष्ठविसर्पपाण्डुरोगशिरःपार्श्वशूलोदावर्तनेत्रास्यदाहहृद्रोगव्यङ्गनीलिकानेत्रनासिकास्यस्रवणहलीमकश्वासकासकामलापच्यपस्मारोन्मादवातरक्तयोनिरेतोदोषतैमिर्यारोचकाविपाकच्छर्दिश्वयथूदरविस्फोटकादयः पित्तव्याधयो विशेषेण महारोगाध्यायोक्ताश्च; एतेषु हि विरेचनं प्रधानतममित्युक्तमग्न्युपशमेऽग्निगृहवत्।। १३।।

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In all the other conditions, purgation therapy is indicated. It is specially indicated for the patients suffering from *kuṣṭha* (obstinate skin diseases including leprosy), *jvara* (fever), *meha* (obstinate urinary disorders including diabetes), *ūrdhvaga-rakta-pitta* (an ailment characterised by bleeding from the upward tracts), *bhagandara* (fistula-in-ano), *udara* (obstinate abdominal diseases including ascites), *arśas* (piles), *bradhna* (inguinal swelling), *plīhan* (splenic disorders), *gulma* (phantom tumour), *arbuda* (tumour), *gala-gaṇḍa* (thyroid enlargement), *granthi* (lymphadenitis), *visūcikā* (choleric diarrhoea), *alasaka* (intestinal torpor), *mūtrāghāta* (suppression of urination), *krimi-koṣṭha* (parasitic infestation of intestines), *visarpa* (erysipelas), *pāṇḍu-roga* (anemia), *śiraḥ-śūla* (headache), *pārśva-śūla* (pain in the sides of the chest), *udāvarta* (upward movement of wind in the abdomen), *netra-dāha* (burning sensation in the eyes), *āsya-dāha* (burning sensation in the face), *hṛd-roga* (heart-diseases), *vyaṅga* (freckles), *nīlikā* (bluish black moles), *netra-sravaṇa* (excessive discharge from eyes), *nāsikā-sravaṇa* (excessive discharge from the nose), *āsya-sravaṇa* (excessive salivation), *halīmaka* (a serious type of jaundice), *śvāsa* (asthma), *kāsa* (cough), *kāmalā* (jaundice), *apacī* (cervical adenitis), *apasmāra* (epilepsy), *unmāda* (insanity), *vāta-rakta* (gout), *yoni-doṣa* (gynecic disorders), *reto-doṣas* (seminal morbidities), *timira* (cataract), *arocaka* (anorexia), *avipāka* (indigestion), *chardi* (vomiting), *śvayathu* (oedema), *udara* (obstinate abdominal disorders including ascites; this appears to be a repetition), *visphoṭaka* (pustular eruptions), etc.

Purgation therapy is also specially useful for *paittika* type of diseases described in *Sūtra* 20 : 14.

For the above mentioned ailments, purgation therapy is the foremost remedy.

As the extinguisher of fire normalises *agni-gṛha* (a house on fire), similarly, purgation therapy, by eliminating aggravated *pitta*, cures all the above mentioned diseases.[13]

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Prohibitions of Nirūha-basti

अनास्थाप्यास्तु-अजीर्ण्यतिस्निग्धपीतस्नेहोत्क्लिष्टदोषाल्पाग्नियानक्लान्तातिदुर्बलक्षुत्तृष्णाश्रमार्तातिकृशभुक्तभक्तपीतोदकवमितविरिक्तकृतनस्तःकर्मक्रुद्धभीतमत्तमूर्च्छितप्रसक्तच्छर्दिनिष्ठीविकाश्वासकासहिक्काबद्धच्छिद्रोदकोदराध्मानालसकविसूचिकामप्रजातामातिसारमधुमेहकुष्ठार्ताः।। १४।।

Administration of *āsthāpana* or *nirūha* (evacuative type of medicated enema) is prohibited for the following :

(1) Person who is suffering from *ajīrṇa* (indigestion), who is *ati-snigdha* (excessively oleated) or who is *pīta-sneha* (just taken oleation therapy);

(2) Person whose *doṣas* are excited (*utkliṣṭa-doṣa*) and who is suffering from *mandāgni* (suppression of the power of digestion);

(3) Who is *yāna-klānta* (fatigued due to riding a vehicle);

(4) Who is *ati-durbala* (excessively weak); *kṣudhārta* (excessively hungry), *tṛṣṇārta* (excessively thirsty) and *śramārta* (excessively tired due to hard work);

(5) Who is *ati-kṛśa* (excessively emaciated);

(6) Who is *bhukta-bhakta* (just taken the meal) and *pītodaka* (just taken water);

(7) Who is *vamita* (just taken emetic therapy) and *virikta* (just taken purgation therapy);

(8) Who is *kṛta-nastaḥ-karma* (just taken inhalation therapy);

(9) Who is *kruddha* (angry) and *bhīta* (fearful);

(10) Who is *matta* (intoxicated) and who is *mūrcchita* (fainted);

(11) Who is suffering from incessant vomiting, ptyalism, asthma, cough and hiccup;

(12) Who is suffering from *baddhodara* (intestinal

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obstruction), *chidrodara* (intestinal perforation) and *udakodara* (ascites) associated with *ādhmāna* (meteorism);

(13) Who is suffering from *alasaka* (intestinal torpor), *visūcikā* (cholera), *āma-prajāta* (miscarriage) and *āmātisāra* (first stage of diarrhoea); and

(14) Who is suffering from *madhumeha* or diabetes mellitus (according to Cakrapāṇi, all the *pramehas* or obstinate urinary disorders are included here) and *kuṣṭha* (obstinate skin diseases including leprosy). [14]

Adverse Effects of Nirūha-basti Administered in Contra-indicated Conditions

तत्राजीर्ण्यतिस्निग्धपीतस्नेहानां दूष्योदरं मूर्च्छा श्वयथुर्वा स्यात्, उत्क्लिष्टदोषमन्दाग्न्योररोचकस्तीव्रः, यानक्लान्तस्य क्षोभव्यापन्नो बस्तिराशु देहं शोषयेत्, अतिदुर्बलक्षुत्तृष्णाश्रमार्तानां पूर्वोक्तो दोषः स्यात्, अतिकृशस्य कार्श्यं पुनर्जनयेत्, भुक्तभक्तपीतोदकयोरुत्क्लिश्योर्ध्वमधो वा वायुर्बस्तिमुत्क्षिप्य क्षिप्रं घोरान् विकाराञ्जनयेत्, वमितविरिक्तयोस्तु रूक्षं शरीरं निरूहः क्षतं क्षार इव दहेत्, कृतनस्तःकर्मणो विभ्रंशं भृशसंरुद्धस्रोतसः कुर्यात्, क्रुद्धभीतयोर्बस्तिरूर्ध्वमुपप्लवेत्, मत्तमूर्च्छितयोर्भृशं विचलितायां संज्ञायां चित्तोपघाताद् व्यापत् स्यात्, प्रसक्तच्छर्दिर्निष्ठीविकाश्वासकासहिक्कार्तानामूर्ध्वीभूतो वायुरूर्ध्वं बस्तिं नयेत्, बद्धच्छिद्रोदकोदराध्मानार्तानां भृशतरमाध्याप्य बस्तिः प्राणान् हिंस्यात्, अलसकविसूचिकामप्रजातामातिसारिणामामकृतो दोषः स्यात्, मधुमेहकुष्ठिनोर्व्याधेः पुनर्वृद्धिः, तस्मादेते नास्थाप्याः।। १५।।

Administration of *nirūha-basti* in contra-indicated conditions produces adverse effects as follows :

(1) In the case of a person who is suffering from indigestion, who is excessively oleated or who has just taken oleation therapy, *nirūha-basti* causes *dūṣyodara* (obstinate abdominal disease caused by the aggravation of all the three *doṣas*), fainting or oedema.

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(2) In the case of a person having excited *doṣas* or the person suffering from the suppression of the power of digestion, *nirūha-basti* causes severe type of anorexia.

(3) In the case of a person fatigued due to riding, *nirūha-basti* causes excessive agitation leading to instantaneous emaciation of the body.

(4) In the case of the person who is excessively weak and who is suffering from hunger, thirst and fatigue, *nirūha-basti* causes the same disorders as described before.

(5) In the case of a person who is excessively emaciated, *nirūha-basti* causes more emaciation.

(6) In the case of a person who has just taken his meal or water, *nirūha-basti* causes excitement of *vāyu* as a result of which the recipe of enema is pushed upwards or downwards leading to the causation of serious ailments instantaneously.

(7) In the case of the person who has already taken emetic or purgation therapy, administration of *nirūha-basti* burns his dehydrated (ununctuous) body as if it is ulcerated by the application of alkalis.

(8) In the case of the person who has taken inhalation therapy, *nirūha-basti* causes impairement of senses, and further obstruction of the channels of circulation.

(9) In the case of the person who is angry or fearful, the *nirūha-basti* causes agitation in the upper part of the body.

(10) In the case of intoxicated and fainted persons, *nirūha-basti* causes further agitation in the consciousness leading to the complications because of mental damage.

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(11) In the case of the person suffering from incessant vomiting, ptyalism, asthma, cough or hiccup, *nirūha-basti* causes the aggravated *vāyu* in the upper part of the body to draw the recipe of enema upwards.

(12) In the case of the person suffering from intestinal obstruction, intestinal perforation or ascites, which are associated with abdominal distension, *nirūha-basti* further increases the intestinal distension and may lead to the death of the patient.

(13) In the case of the person suffering from intestinal torpor, cholera, abortion or *āmātisāra* (first stage of diarrhoea), *nirūha-basti* causes ailments due to *āma* (product of improper digestion and metabolism).

(14) In the case of the person suffering from *madhu-meha* (obstinate urinary disorders including diabetes) and *kuṣṭha* (obstinate skin diseases including leprosy), administration of *nirūha-basti* further aggravates these ailments.

Therefore, *nirūha-basti* is prohibited for the above mentioned type of patients. [15]

In *Cikitsā* 13 : 89, *nirūha* along with *anuvāsana* is prescribed for *baddhodara* (intestinal obstruction). If this *baddhodara* is associated with abdominal distension, *nirūha-basti* should not be given as suggested above. Therefore, there is no contradiction between the statements made in *Cikitsā* 13 : 89 and the one made in the above text.

Some physicians solve this apparent contradiction in another way. According to them, when *baddhodara* (intestinal obstruction) is associated with constipation (*vibandha*), then *nirūha* type of enema should be given as suggested in *Cikitsā* 13 : 89. Without such constipation, *nirūha* is contra-indicated for the patient suffering from *baddhodara* as suggested in the above text.

Indications of Nirūha-basti

शेषास्त्वास्थाप्याः; विशेषतस्तु सर्वाङ्गैकाङ्गकुक्षिरोगवातवर्चोमूत्रशुक्र-सङ्गबलवर्णमांसरेतःक्षयदोषाध्मानाङ्गसुप्तिक्रिमिकोष्ठोदावर्तशुद्धातिसारप-

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र्वभेदाभितापप्लीहगुल्मशूलहृद्रोगभगन्दरोन्मादज्वरब्रध्नशिरःकर्णशूलहृदय-पार्श्वपृष्ठकटीग्रहवेपनाक्षेपकगौरवातिलाघवरजःक्षयार्तविषमाग्निस्फिग्जानु-जङ्घोरुगुल्फपार्ष्णिप्रपदयोनिबाह्वङ्गुलिस्तनान्तदन्तनखपर्वास्थिशूलशोषस्त-म्भान्त्रकूजपरिकर्तिकाल्पाल्पसशब्दोग्रगन्थोत्थानादयो वातव्याधयो विशेषेण महारोगाध्यायोक्ताश्च; एतेष्वास्थापनं प्रधानतममित्युक्तं वनस्पतिमूलच्छेद-वत्।। १६।।

In all the other conditions *nirūha-basti* (evacuative type of medicated enema) is indicated. It is specially useful in *sarvāṅga-roga* (paralysis of the whole body), *ekāṅga-roga* (paralysis of one of the limbs), *kukṣi-roga* (diseases of pelvic region), *vāta-saṅga* (retention of flatus), *varcaḥ-saṅga* (retention of stool), *mūtra-saṅga* (retention of urine), *śukra-saṅga* (retention of semen), *bala-kṣaya* (diminution of strength), *varṇa-kṣaya* (diminution of complexion), *māṃsa-kṣaya* (diminution of muscle tissue), *retaḥ-kṣaya* (diminution of semen), *bala-doṣa* (morbiditiy of strength), *varṇa-doṣa* (morbidity of complexion), *māṃsa-doṣa* (morbidity of muscle tissue), *reto-doṣa* (morbidity of semen), *ādhmāna* (meteorism), *aṅga-supti* (numbness of limbs), *krimi-koṣṭha* (parasitic infestation of the intestine), *udāvarta* (upward movement of the wind in the abdomen), *śuddhātisāra* (diarrhoea without the association of *āma*), *parva-bheda* (joint pain), *abhitāpa* (feeling of burning sensation), *plīhan* (splenic disorder), *gulma* (phantom tumour), *śūla* (colic pain), *hṛd-roga* (heart disease), *bhagandara* (anal fistula), *unmāda* (insanity), *jvara* (fever), *bradhna* (inguinal swellings), *śiraḥ-śūla* (headache), *karṇa-śūla* (earache), *hṛdaya-graha* (cardiac spasm), *pārśva-graha* (stiffness in the sides of the chest), *pṛṣṭha-graha* (stiffness of the back), *kaṭī-graha* (stiffness of the lumbar region), *vepanārti* (tremor), *ākṣepaka-arti* (convulsions), *gaurava-arti* (excessive heaviness of the body), *atilāghava-arti* (excessive lightness of the body), *rajaḥ-kṣayārti* (amenorrhoea), *viṣamāgni* (irregular power of digestion), *sphik-śūla-śoṣa-stambha* (pain, atrophy and stiffness of the

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buttocks), *jānu-śūla-śoṣa-stambha* (pain, atrophy and stiffness of knee-joints), *jaṅghā-śūla-śoṣa-stambha* (pain, atrophy and stiffness of the calf region), *ūru-śūla-śoṣa-stambha* (pain, atrophy and stiffness of the thighs), *gulpha-śūla-śoṣa-stambha* (pain, atrophy and stiffness of ankles), *pārṣṇi-śūla-śoṣa-stambha* (pain, atrophy and stiffness of heels), *prapada-śūla-śoṣa-stambha* (pain, atrophy and stiffness of feet), *yoni-śūla-śoṣa-stambha* (pain, atrophy and stiffness of gynecic organs), *bāhu-śūla-śoṣa-stambha* (pain, atrophy and stiffness of arms), *aṅguli-śūla-śoṣa-stambha* (pain, atrophy and stiffness of fingers), *stanānta-śūla-śoṣa-stambha* (pain, atrophy and stiffness at the end of the breasts or nipples), *danta-śūla-śoṣa-stambha* (pain, atrophy and stiffness of teeth), *nakha-śūla-śoṣa-stambha* (pain, atrophy and stiffness of nails), *parva-śūla-śoṣa-stambha* (pain, atrophy and stiffness of joints), *asthi-śūla-śoṣa-stambha* (pain, atrophy and stiffness of bones), *antra-kūjana* (intestinal gurgling), *parikartikā* (sawing pain in the abdomen), *alpālpa-utthāna* (voiding stool in small quantities frequently), *saśabdotthāna* (voiding stool with noise), *ugra-gandha-utthāna* (voiding of foul-smelling stool) and such other ailments.

Nirūha-basti is specially useful in *vātika* diseases described in *Sūtra* 20 : 11.

For the above mentioned ailments, *nirūha-basti* is the foremost medication. As a tree gets destroyed by cutting its roots, similarly the above mentioned diseases get cured by the administration of *nirūha-basti.* [16]

Contra-indications of Anuvāsana-basti

य एवानास्थाप्यास्त एवाननुवास्याः स्युः; विशेषतस्त्वभुक्तभक्तनव-ज्वरपाण्डुरोगकामलाप्रमेहार्शःप्रतिश्यायारोचकमन्दाग्निदुर्बलप्लीहकफोद-रोरुस्तम्भवर्चोभेदविषगरपीतपित्तकफाभिष्यन्दगुरुकोष्ठश्लीपदगलगण्डा-पचिक्रिमिकोष्ठिनः।। १७।।

Anuvāsana-basti is prohibited in all the conditions for

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which *nirūha-basti* is contra-indicated. It is specially contra-indicated in the following conditions :

(1) *Abhukta-bhakta* (a person who has not taken food); and

(2) The person suffering from *nava-jvara* (freshly occurring fever), *pāṇḍu-roga* (anemia), *kāmalā* (jaundice), *prameha* (obstinate urinary disorders including diabetes) and *arśas* (piles); *pratiśyāya* (coryza), *arocaka* (anorexia), *mandāgni* (suppression of the power of digestion), *daurbalya* (weakness), *plīhodara* (splenic disorders), *kaphodara* (obstinate abdominal ailments caused by aggravated *kapha*), *ūru-stambha* (spasticity of thighs), *varco-bheda* (diarrhoea), *viṣa-pīta* (ingestion of natural poison), *gara-pīta* (ingestion of artificial poison), *pittābhiṣyanda* (conjunctivitis caused by aggravated *pitta*), *kaphābhiṣyanda* (conjunctivitis caused by aggravated *kapha*), *guru-koṣṭha* (costive bowel), *ślīpada* (elephantiasis), *gala-gaṇḍa* (enlargement of thyroid gland), *apacī* (cervical adenitis) and *krimi-koṣṭha* (intestinal parasites). [17]

Nirūha-basti is contra-indicated for a person who has just taken food (*bhukta-bhakta*). On the other hand, *anuvāsana-basti* is prohibited for a person who has not taken any food (*abhukta-bhakta*). In the case of a person who has not taken any food, the recipe of *anuvāsana-basti* moves upwards to produce adverse effects. This does not happen in the case of *nirūha-basti*. *Anuvāsana-basti* is generally given in the evening. The fat contained in its recipe spreads faster because of its *sūkṣma* (subtle) attribute. Therefore, if the person is without any food, and the gastro-intestinal tract is empty, then the recipe moves upwards very quickly.

In *Siddhi* 1 : 33, *anuvāsana-basti* is prescribed to be given in *bhaktānabhinandana* (disliking for food). *Aruci* or anorexia takes place because of this disliking for food. Therefore, the prohibition of *anuvāsana-basti* in *aruci* which is only the causative factor does not constitute a contradictory statement. *Bhaktanabhinandana* or disliking

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for food is caused by *vāyu* for which *anuvāsana-basti* is indicated. *Aruci* implies absolute desirelessness (*anicchā*) for which *anuvāsana-basti* is contra-indicated.

Adverse Effects of Anuvāsana-basti in Contra-indicated Conditions

तत्राभुक्तभक्तस्यानावृतमार्गत्वादूर्ध्वमतिवर्तते स्नेहः, नवज्वरपाण्डुरोग-कामलाप्रमेहिणां दोषानुत्क्लिश्योदरं जनयेत्, अर्शसस्यार्शांस्यभिष्यन्द्याध्मानं कुर्यात्, अरोचकार्तस्यान्नगृद्धिं पुनर्हन्यात्, मन्दाग्निदुर्बलयोर्मन्दतरमग्निं कुर्यात्, प्रतिश्यायप्लीहादिमतां भृशमुत्क्लिष्टदोषाणां भूय एव दोषं वर्धयेत्; तस्मादेते नानुवास्याः ।। १८ ।।

Administration of *anuvāsana-basti* in contra-indicated conditions produces adverse effects as follows :

(1) If the person has not taken any food, *anuvāsana-basti* spreads upwards due to the absence of any obstruction in the alimentary tract.

(2) If the person is suffering from *nava-jvara* (fever of recent origin), anemia, jaundice, and *prameha* (obstinate urinary disorders including diabetes), then the administration of *anuvāsana-basti* causes excitation of *doṣas* leading to the manifestation of *udara* (obstinate abdominal diseases including ascites).

(3) If the person is suffering from piles, then administration of *anuvāsana-basti* produces stickiness in the piles leading to *ādhmāna* (abdominal distension).

(4) If the person is suffering from anorexia, then the administration of *anuvāsana-basti* further impairs the desire for food.

(5) If the person is suffering from *mandāgni* (suppression of the power of digestion) and debility, then the administration of *anuvāsana-basti* further reduces the power of digestion.

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(6) If the person is suffering from coryza, splenic disorder (and such other ailments described in the item no. 7 of the para-17 above), then the administration of *anuvāsana-basti* causes excessive aggravation of the already aggravated *doṣas*. So *anuvāsana-basti* must not be administered to the above category of patients.

Indications of Anuvāsana-basti

य एवास्थाप्यास्त एवानुवास्याः; विशेषतस्तु रूक्षतीक्ष्णाग्नयः केवलवातरोगार्ताश्च; एतेषु ह्यनुवासनं प्रधानतममित्युक्तं मूले द्रुमप्रसेकवत् ॥१९॥

Anuvāsana-basti is indicated in the very conditions for which *nirūha-basti* is indicated (vide para no. 16). It is specially indicated for the person having ununctuousness, *tīkṣṇāgni* (sharp power of digestion) and *kevala-vāta-roga* (diseases caused by *vāyu* alone, i.e. not associated with *āma*). In these conditions, *anuvāsana-basti* is the foremost therapy. As sprinkling of water at the root prevents withering out of the tree, similarly, administration of *anuvāsana-basti* cures diseases in the body of the person. [19]

This simile regarding the effect of *basti* is already elaborated in *Sūtra* 20 : 13. A similar description was also made in *Siddhi* 1 : 31.

Contra-indications of Inhalation Therapy

अशिरोविरेचनार्हास्तु अजीर्णिभुक्तभक्तपीतस्नेहमद्यतोयपातुकामाः स्नातशिराः स्नातुकामः क्षुत्तृष्णाश्रमार्तमत्तमूर्च्छितशस्त्रदण्डहतव्यवायव्यायामपानक्लान्तनवज्वरशोकाभितप्तविरिक्तानुवासितगर्भिणीनवप्रतिश्यायार्ताः, अनृतौ दुर्दिने चेति।। २०।।

Śiro-virecana (inhalation therapy) is prohibited for the following :

(1) The person who is suffering from indigestion or who has already taken food;

(2) The person who has already taken oleation therapy;

(3) The person who desires to take oleation therapy, alcohol or water;

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(4) The person who has taken head-bath or who desires to take bath;

(5) The person who is hungry and thirsty;

(6) The person who is suffering from fatigue, intoxication or fainting;

(7) The person afflicted by injury with a weapon or a stick;

(8) The person who is fatigued because of sexual intercourse, physical exercise or intake of alcohol;

(9) The person afflicted with freshly occurring fever and grief;

(10) The person who has taken purgation therapy or *anuvāsana-basti*;

(11) A pregnant woman;

(12) The person who is suffering from freshly occurring coryza; and

(13) In inappropriate season or on a cloudy day.

Adverse Effects of Inhalation Therapy in Prohibited Conditions

तत्राजीर्णिभुक्तभक्तयोर्दोष ऊर्ध्ववहानि स्त्रोतांस्यावृत्य कासश्वासच्छर्दि-प्रतिश्यायाञ्जनयेत्, पीतस्नेहमद्यतोयपातुकामानां कृते च पिबतां मुखना-सास्त्रावाक्ष्युपदेहतिमिरशिरोरोगाञ्जनयेत्, स्नातशिरसः कृते च स्नानाच्छिरसः प्रतिश्यायं, क्षुधार्तस्य वातप्रकोपं, तृष्णार्तस्य पुनस्तृष्णाभिवृद्धिं मुखशोषं च, श्रमार्तमत्तमूर्च्छितानामास्थापनोक्तं दोषं जनयेत्, शस्त्रदण्डहतयोस्तीव्रतरां रुजं जनयेत्, व्यवायव्यायामपानक्लान्तानां शिरःस्कन्धनेत्रोरःपीडनं, नवज्वरशोकाभितप्तयोरूष्मा नेत्रनाडीरनुसृत्य तिमिरं ज्वरवृद्धिं च कुर्यात्, विरिक्तस्य वायुरिन्द्रियोपघातं कुर्यात्, अनुवासितस्य कफः शिरोगुरुत्वकण्डू-क्रिमिदोषाञ्जनयेत्, गर्भिण्या गर्भं स्तम्भयेत् स काणः कुणिः पक्षहतः पीठसर्पी वा जायते, नवप्रतिश्यायार्तस्य स्त्रोतांसि व्यापादयेत्, अनृतौ दुर्दिने च शीतदोषान् पूतिनस्यं शिरोरोगं च जनयेत्; तस्मादेते न शिरोविरेचनार्हाः।। २१।।

Administration of inhalation therapy in contra-indicated conditions gives rise to adverse effects as follows :

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(1) If the person is suffering from indigestion or if he has already taken food, then administration of inhalation therapy causes occlusion of the channels of circulation moving upwards causing thereby cough, asthma, vomiting and coryza.

(2) If the person has already taken oleation therapy or if he desires to take oleation therapy, alcohol or water or if he takes water after the therapy, then the administration of inhalation therapy gives rise to ptyalism, discharge from the nose, stickiness of eyes, cataract and head-diseases.

(3) If the person has taken head-bath or takes head-bath after the therapy, then *śiro-virecana* gives rise to coryza.

(4) Administration of inhalation therapy to a hungry person aggravates *vāyu*.

(5) Administration of inhalation therapy to a thirsty person intensifies thirst, and causes dryness of the mouth.

(6) Administration of inhalation therapy to a person afflicted with fatigue, intoxication or fainting produces the same adverse effects as mentioned in respect of *nirūha-basti*.

(7) Administration of inhalation therapy to a person injured by weapon or beaten by a stick produces excruciating pain.

(8) Administration of inhalation therapy to a person fatigued because of sexual indulgence, physical work or taking alcohol (even after a day) causes pain in the head, shoulders, eyes and chest.

(9) In the case of a person suffering from *nava-jvara* (fever of recent origin) and grief, administration of inhalation therapy causes the heat to spread into the

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channels in the eyes resulting in *timira* (cataract) and further aggravation of the fever.

(10) If a person who has already taken purgation therapy is given inhalation therapy, then the *vāyu* in his body gets aggravated leading to the injury to his sense organs.

(11) If a person who has already taken *anuvāsana-basti* is given inhalation therapy, then the *kapha* in his body gets aggravated leading to heaviness of head, itching and parasitic infestation.

(12) If a pregnant woman is given inhalation therapy, the growth of the foetus gets arrested, and she gives birth to an offspring who may be *kāṇa* (blind by one eye), *kuṇi* (with deformity of upper limbs), *pakṣa-hata* (hemiplegic) or *pīṭha-sarpis* (with deformity of the lower limbs).

(13) If inhalation therapy is given to a person who is suffering from *nava-pratiśyāya* (freshly occurring coryza), then it may cause morbidity of the channels of circulation.

(14) Administration of inhalation therapy on a cloudy day or during inappropriate seasons may cause ailments due to cold, *pūti-nasya* (putrified rhinitis) and *śiro-roga* (head-diseases).

Therefore, in the above mentioned conditions inhalation therapy is prohibited. [21]

The last item mentioned above may be interpreted as "inhalation therapy administered during winter season causes ailments due to cold, and during summer as well as rainy seasons causes *pūti-nasya* and *śiro-roga*". According to other scholars, these ailments are caused if inhalation therapy is administered on a cloudy day (*durdina*) in the seasons other than the rainy season (*avārṣika*).

Indications of Inhalation Therapy

शेषास्त्वर्हाः, विशेषतस्तु शिरोदन्तमन्यास्तम्भगलहनुग्रहपीनसगलशु-

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पिण्डकाशालूकशुक्रतिमिरवर्त्मरोगव्यङ्गोपजिह्विकार्धावभेदकग्रीवास्कन्धांसास्यनासिकाकर्णाक्षिमूर्धकपालशिरोरोगार्दितापतन्त्रकापतानकगलगण्डदन्तशूलहर्षचालाक्षिराज्यर्बुदस्वरभेदवाग्ग्रहगद्गदक्रथनादय ऊर्ध्वजत्रुगताश्च वातादिविकाराः परिपक्वाश्च; एतेषु शिरोविरेचनं प्रधानतममित्युक्तं, तद्धचुत्तमाङ्गमनुप्रविश्य मुञ्जादीषिकामिवासक्तां केवलं विकारकरं दोषमपकर्षति।। २२।।

Inhalation therapy is indicated for the remaining ailments. It is specially useful in *śiro-stambha* (stiffness of the head), *danta-stambha* (stiffness of teeth), *manyā-stambha* (torticollis), *gala-graha* (spasm of the throat), *hanu-graha* (lock-jaw), *pīnasa* (chronic coryza), *gala-śuṇḍikā* (tonsilitis), *gala-śālūka* (tumour in the throat), *śukra* (corneal ulcer), *timira* (cataract), *vartma-roga* (diseases of eye-lids), *vyaṅga* (freckles), *upa-jihvikā* (uvulitis), *ardhāvabhedaka* (hemicrania), *grīvā-roga* (diseases of the neck), *skandha-roga* (diseases of the shoulders), *aṃsa-roga* (diseases of the scapula), *āsya-roga* (diseases of the mouth), *nāsikā-roga* (diseases of the nose), *karṇa-roga* (diseases of the ears), *akṣi-roga* (diseases of the eyes), *mūrdha-roga* (diseases of the cranium), *kapāla-roga* (diseases of the forehead), *śiro-roga* (diseases of the head), *ardita* (facial paralysis), *apatantraka* (convulsions with unconsciousness), *apatānaka* (convulsions with consciousness), *gala-gaṇḍa* (goitre), *danta-śūla* (toothache), *danta-harṣa* (setting teeth on edge), *danta-cāla* (looseness of teeth), *akṣi-rāji* (conjunctivitis), *arbuda* (tumour), *svara-bheda* (hoarseness of the voice), *vāg-graha* (loss of speech), *gad-gada* (spasmodic speech), *krathana* (stammering), etc., and diseases of the head and neck which are caused by aggravated *vāyu* and which are fully matured (free from *āma-doṣa*).

For the treatment of the above mentioned maladies, inhalation therapy is the foremost remedy. The recipe administered through inhalation therapy enters into the head (cerebrum), and draws out exclusively the morbid matter as

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the pith (*īṣikā*) is taken out after removing the fibrous coating of *muñja* (a type of grass) adhered to it. [22]

Pīnasa (coryza) referred to above represents the matured (*pakva*) stage of the disease. In the immature stage of coryza (*pratiśyāya*) inhalation therapy is prohibited. Thus, there is no contra-diction between these two statements. The difference between *apatantraka* and *apatānaka* will be described in *Siddhi* 9 :14-15.

Supra-clavicular region is the normal habitat of *kapha*. Therefore, the diseases of head and neck (supra-clavicular region) described above refes to those caused by *vāyu* associated with *kapha*.

As the pith is taken out of *muñja* (a type of grass) without damaging the surrounding fibrous material adhered to it, similarly, by the administration of inhalation therapy, only the morbid material is drawn out from the brain without causing any damage to the brain-material (cerebral tissues).

Seasonal Propriety of Inhalation Therapy

प्रावृट्शरद्वसन्तेतरेष्वात्ययिकेषु रोगेषु नावनं कुर्यात् कृत्रिमगुणोपधानात्; ग्रीष्मे पूर्वाह्णे, शीते मध्याह्ने, वर्षास्वदुर्दिने चेति।। २३।।

In the case of an emergency, inhalation therapy can be given even in the seasons other than *prāvṛṭ* (first part of the rainy season), *śarat* (autumn) and *vasanta* (spring) by artificially creating the congenial environment. In summer, inhalation therapy should be given in the morning. In the winter, it should be given during the mid-day. In the rainy season, it should be given when the sky is free from clouds. [23]

For the diseases in general, inhalation therapy should be given in *prāvṛṭ* (first part of the rainy season), *śarat* (autumn) and *vasanta* (spring). Only in an emergency, this therapy can also be given in other seasons, viz., *hemanta* (winter), *grīṣma* (summer) and *varṣā* (rainy season), and not otherwise. While giving inhalation therapy during these prohibited seasons, the procedure prescribed in *Vimāna* 8 : 126-127 should be followed.

Contents of Chapter and Epilogue

तत्र श्लोकाः-

इति पञ्चविधं कर्म विस्तरेण निदर्शितम्।

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येभ्यो यत्र हितं यस्मात् कर्म येभ्यश्च यद्धितम्।। २४।।
न चैकान्तेन निर्दिष्टेऽप्यर्थेऽभिनिविशेद्बुधः।
स्वयमप्यत्र वैद्येन तर्क्यं बुद्धिमता भवेत्।। २५।।
उत्पद्येत हि साऽवस्था देशकालबलं प्रति।
यस्यां कार्यमकार्यं स्यात् कर्म कार्यं च वर्जितम्।। २६।।
छर्दिर्हृद्रोगगुल्मानां वमनं स्वे चिकित्सिते।
अवस्थां प्राप्य निर्दिष्टं कुष्ठिनां बस्तिकर्म च।। २७।।
तस्मात् सत्यपि निर्देशे कुर्यादूह्य स्वयं धिया।
विना तर्केण या सिद्धिर्यदृच्छासिद्धिरेव सा।। २८।।

To sum up :

Thus, five elimination therapies taken together called (*pañca-karma* are explained above in detail with reference to their following aspects) :

(1) Contra-indications of these therapies for different categories of diseases;

(2) The reasons for which these therapies are contra-indicated; and

(3) The ailments for which these therapies are indicated.

A wise physician should not make a judgement exclusively on the suggestions made above in this chapter. He should use his own discretion and reasoning in arriving at the correct judgement.

Due to the nature of the habitat, time and strength of the patient, situations may arise because of which the therapy indicated for an ailment becomes ineffective, and a prohibited therapy may become useful.

In the chapters dealing with the treatment of *chardi* (vomiting), *hṛd-roga* (heart-diseases) and *gulma* (phantom tumour), emetic therapy [though normally prohibited] is prescribed in certain stages of these diseases. Similarly, *basti* or enema therapy is prescribed in the chapter dealing with the treatment of *kuṣṭha* [thought is generally prohibited] depending upon the stage of this disease.

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Therefore, despite the directions laid down in this chapter, the physician should determine the correct therapy for an ailment by the use of his own discretion. The success achieved without the exercise of the power of reasoning (*tarka*) is nothing but only the success per chance. [24-28]

Some ailments are described in this chapter in which emetic therapy, etc., are indicated, and in some others, these are prohibited. These are the general guide-lines, and variations are possible. Some conditions described here as contra-indications may require the therapy, and in some other indicated conditions emetic therapy, etc., may not be useful. Therefore, the exact utility or otherwise has to be determined by reasoning (*tarka*).

Use of the term '*buddhimatā*' meaning "by a wise physician" implies that the determination by reasoning has to be done only by a wise physician. As has been stated in *Vimāna* 8 : 149, it is better for the physician of low intellectual quotient to follow the directions provided in this text as he is incapable of determining the exact requirement of the therapy by reasoning.

There are exceptions to the general rules prescribed in this chapter inasmuch as in the chapter dealing with the treatment of vomiting (*Cikitsā* 20 : 34), heart-diseases (*Cikitsā* 26 : 96) and *gulma* or phantom tumour (*Cikitsā* 5 : 50), emetic therapy is prescribed.

In addition to the scriptural instructions, a wise physician should use his own judgement and discretions for taking a final decission in this matter as has been suggested in *Vimāna* 8 : 149.

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते
दृढबलसंपूरिते सिद्धिस्थाने पञ्चकर्मीयसिद्धिर्नाम
द्वितीयोऽध्यायः ।। २ ।।

Thus, ends the second chapter of *Siddhi*-section dealing with "the Perfect Administration of *Pañca-karma*" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - III

तृतीयोऽध्यायः

(PERFECTION IN TREATMENT THROUGH KNOWLEDGE OF BASTI-PRINCIPLES)

Prologue

अथातो बस्तिसूत्रीयां सिद्धिं व्याख्यास्यामः।।१।।
इति ह स्माहं भगवानात्रेयः।।२।।

We shall now expound the chapter dealing with the "Achievement of Perfection in the Treatment Through (the Knowledge of) the Principles of *Basti* (Medicated Enema)".

Thus, said Lord Ātreya. [1-2]

In the previous chapter no. II, contra-indications and indications of *pañca-karma,* viz., emetic therapy, etc., were described. In the first chapter of this section, the methods of administering *pañca-karma* (five elimination therapies) were described in brief. The same in respect of *basti*. (medicated enema) therapy is being expounded in this third chapter.

Dialogue

कृतक्षणं शैलवरस्य रम्ये स्थितं धनेशायतस्य पार्श्वे।
महर्षिसङ्घैर्वृतमग्निवेशः पुनर्वसुं प्राञ्जलिरन्वपृच्छत्।।३।।
बस्तिर्नरेभ्यः किमपेक्ष्य दत्तः स्यात् सिद्धिमान् किम्मयमस्य नेत्रम्।
कीदृक्प्रमाणाकृति किंगुणं च केभ्यश्च किंयोनिगुणश्च बस्तिः।।४।।
निरूहकल्पः प्रणिधानमात्रा स्नेहस्य का वा शयने विधिः कः।
के बस्तयः केषु हिता इतीदं श्रुत्वोत्तरं प्राह वचो महर्षिः।।५।।

When, after completing his daily rituals, Punarvasu was sitting at leisure surrounded by a group of saints in the beautiful valley of the Himalayas, close to the abode of Kubera (the god of wealth), Agniveśa with folded hands enquired about the following topics :

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(1) Which are the factors to be kept in view for the successful administration of *basti* therapy ?
[to be explained in the verse no. 6]

(2) The nozzle for giving enema should be prepared out of which material?
[to be explained in the verse no. 7]

(3) What are the size, shape and qualities of enema-receptacle?
[to be explained in the verse nos. 8 - $^{2}/_{4}$10]

(4) What is the source material to be used in the preparation of the enema-receptacle for different persons, and what are its attributes ?
[to be explained in verse nos. 10$^{2}/_{4}$ - $^{2}/_{4}$12]

(5) What are the recipes of *nirūha-basti* ?
[to be explained in the verse nos. 12$^{2}/_{4}$ - $^{2}/_{4}$31]

(6) What should be the dosage of *nirūha-basti*?
[to be explained in the verse nos. 31$^{2}/_{4}$ - $^{2}/_{4}$33]

(7) What should be the dosage of *anuvāsana-basti*?
[to be explained in the next chapter no. IV]

(8) In which position, the patient should lie down during the administration of *basti*?
[to be explained in the verse nos. 33$^{2}/_{4}$ - $^{2}/_{4}$34]

(9-10) What are the recipe of *basti*, and for which type of patients these are useful ?
[to be explained in the verse nos. 35$^{2}/_{4}$ - 70]

After hearing these queries, the Great Sage replied as follows. [To be elaborated in subsequent verses and the next chapter.] [3-5]

Out of the ten different queries described above, nine will be answered in this chapter, and the answer or explanation to the query listed at item no. 7 will be provided in the next chapter.

In the place of "*snehasya kā vā*" there is a variant reading, viz., "*snehasya vā kaḥ*". If this variant reading is accepted, then it refers to

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anuvāsana-basti which is described in the verse nos. 27-29 to be administered in the evening of the same day, i.e. of the day of the administration of *nirūha-basti.*

Factors to be Kept in View for Successful Administration of Nirūha

समीक्ष्य दोषौषधदेशकालसात्म्याग्निसत्त्वादिवयोबलानि।
बस्तिः प्रयुक्तो नियतं गुणाय स्यात् सर्वकर्माणि च सिद्धिमन्ति।। ६।।

To achieve success in the administration and to obtain the desired therapeutic effects, *basti* should be administered keeping in view the factors like nature of the *doṣas*, medicines, habitat, season, homologation, *agni* (power of digestion and metabolism), *sattva* (psychic condition), etc., age and strength of the patient. [6]

Factors to be kept in view while treating patients, and administering therapies are already described in *Sūtra* 15 : 5, *Vimāna* 1 : 3 and *Vimāna* 8 : 69-78. Though their numbers are differently described in different places, they actually form parts of the ten factors which are already described in the commentary on *Cikitsā* 30 : 326.

Material for Enema-nozzle

सुवर्णरूप्यत्रपुताम्ररीतिकांस्यास्थिशस्त्रद्रुमवेणुदन्तैः ।
नलैर्विषाणैर्मणिभिश्च तैस्तैर्नेत्राणि कार्याणि सु(त्रि)कर्णिकानि।। ७।।

The enema-nozzle should be made of either gold, silver, tin, copper, brass, bronze, bone, iron, wood, bamboo-reed, ivory, pipe, horn or gems. It should be fitted with well polished rings (which are to be three in number). [7]

In the place of '*sukarṇikāni*' meaning "fitted with well polished rings", there is a variant reading as '*tri-karṇikam*' meaning "fitted with three rings". Description about these three rings will be made later (in verse no. $^{2}/_{4}10$).

Size and Shape of Nozzle

षड्द्वादशाष्टाङ्गुलसंमितानि षड्विंशतिद्वादशवर्षजानाम्।
स्युर्मुद्गकर्कन्धुसतीनवाहिच्छिद्राणि वर्त्याऽपिहितानि चैव।। ८।।
यथावयोऽङ्गुष्ठकनिष्ठिकाभ्यां मूलाग्रयोः स्युः परिणाहवन्ति।

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ऋजूनि गोपुच्छसमाकृतीनि श्लक्ष्णानि च स्युर्गुडिकामुखानि।। ९।।
स्यात् कर्णिकैकाऽग्रचतुर्थभागे मूलाश्रिते बस्तिनिबन्धने द्वे।

For the patients of the age of six, twenty and twelve years, the length of the nozzle should be six, twelve and eight *aṅgulas* (one *aṅgula* or finger's breadth = 3/4 of an inch approx.) respectively.

The calibre of the hole inside the nozzles should be such as to allow the passage of a seed of *mudga* (green gram), *karkandhu* (small variety of jujube) and *satīna* (pea) respectively. This hole should be corked with a *varti* (elongated plug).

The circumference of the nozzle at the base and top should be the same as that of the thumb and little finger respectively of the patient of that age (i.e. six, twenty and twelve years old).

It should be straight and tapering like the tail of a cow. The mouth (opening at the top) of the nozzle should be smooth and globular.

One ring (*karṇikā*) should be fixed at the level of one fourth from the top, and two other rings should be fixed at the base in order to facilitate tying the mouth of the bladder (*basti*) around the nozzle. [8 - $^{2}/_{4}$ 10]

The length of enema-nozzle for a patient of the age from 1 to 6 years should be six *aṅgulas* (finger's breadth), for a patient who is 12 years old, it should be eight *aṅgulas*, and for a patient who is twenty years old, it should be twelve *aṅgulas*.

While describing the age of the patient as 6, 20 and 12 the serial order is changed to emphasise the fact that before sixth and after twentieth years of age there should be no variation in the size of nozzle. After the sixth year, for each additional year, the size of the nozzle should be increased by 1/3rd of an *aṅgula*. Thus, for the twelfth year of age, the size of the nozzle becomes eight *aṅgulas*. After twelfth year of age, for each additional year the size of the nozzle should be increased by half *aṅgula*. Thus, for a patient of twenty years of age the size of the nozzle becomes twelve *aṅgulas*.

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The size of the nozzle described in *Suśruta* : *Cikitsā* 35 : 7 is only slightly different from what is described here; hence the difference is not very significant.

The calibre of the hole in the nozzle for a twenty years old patient is described above to allow the seed of *karkandhu* to pass through. This *karkandhu* is *śṛgāla-badarī* which is smaller in size. Keeping this in view, *Suśruta* (*Cikitsā* 35 : 9) has stated that the calibre of the hole in the nozzle should allow the passage of *kolāsthi* (seed of *kola*). If *karkandhu* is interpreted as *bṛhad-badarī* (big size jujube-fruit), then its passage through a hole inside the nozzle of the circumference of little finger is impossible. In view of this contradiction, some physicians interpret the term '*kola*' as the pulp inside the seed of the fruit which is obviously smaller in size.

The mouth of the nozzle is described to be plugged with a *varti* (elongated plug) to prevent extraneous matter to enter into it when not in use.

The mouth of the nozzle should be smooth, and not rough. It should be globular and not with sharp edge.

One of the rings is stated to be fixed at the level of one-fourth from the top. This ring prevents the entering of the whole nozzle into the rectum of the patient while administering the enema therapy. The other two rings to be fixed at the base of the nozzle will help in tying the mouth (opening) of the bladder (*basti*) over the space between these two rings securedly.

Source of Enema-receptacle (Basti) and Its Attributes

जारद्गवो माहिषहारिणौ वा स्याच्छौकरो बस्तिरजस्य वाऽपि।। १०।।
दृढस्तनुर्नष्टसिरो विगन्धः कषायरक्तः सुमृदुः सुशुद्धः।
नृणां वयो वीक्ष्य यथानुरूपं नेत्रेषु योज्यस्तु सुबद्धसूत्रः।। ११।।

The enema-receptacle should be prepared of the bladder of old ox, buffalo, deer, pig or goat. It should be firm, thin, free from vessels and without any foul odour. It should be tanned with astringent drugs by which it becomes red in colour. It should be very soft and very clean. Keeping in view the age of the patient, the *basti* (enema-receptacle or bladder) of appropriate capacity should be selected, and it should be tied securedly to the nozzle of appropriate size with the help of strings. [$10^2/_4$ - 11]

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In Case of non-availability of Bladder

बस्तेरलाभे प्लवजो गलो वा स्यादङ्गपादः सुघनः पटो वा।

If bladder is not available then the sac in the throat of a pelican (*plava*) or a sac prepared of either the skin of a bat or a thick cloth should be used as enema-receptacle. [$^{2}/_{4}$ 12]

Auspicious Time for Administration of Basti Therapy

आस्थापनार्हं पुरुषं विधिज्ञः समीक्ष्य पुण्येऽहनि शुक्लपक्षे।। १२।।
प्रशस्तनक्षत्रमुहूर्तयोगे जीर्णान्नमेकाग्रमुपक्रमेत।

The physician well-versed in the method of administering *basti* (medicated enema) should give this therapy to a suitable patient (for whom *basti* therapy is indicated) after he has digested his meal, and has concentration of the mind. It should be given on an auspicious day in the *śukla-pakṣa* (bright fortnight of lunar mouth) having a propitious *nakṣatra* (constellation), *muhūrta* (period of the day) and *yoga* (planatory conjuction). [12 $^{2}/_{4}$ - $^{2}/_{4}$ 13]

Bright fortnight (*śukla-pakṣa*) of a lunar month is auspicious for initiating all good activities. But Hārīta has described the black fortnight (*kṛṣṇa-pakṣa*) of the lunar month as suitable for the administration of *basti* therapy because of the following :

(1) All the diseases treated during this period get cured for ever; and

(2) The gods appear during the bright fortnight (*śukla-pakṣa*) whereas demons as well as diseases appear during the black fortnight (*kṛṣṇa-pakṣa*).

Therefore, according to Hārīta, diseases should always be treated during the black fortnight.

The term '*ekāgra*' implies that the mind of the patient should be concentrated on the procedure of the administration of *basti* (medicated enema).

Method of Administering Basti

बलां गुडूचीं त्रिफलां सरास्नां द्वे पञ्चमूले च पलोन्मितानि।। १३।।
अष्टौ फलान्यर्धतुलां च मांसाच्छागात् पचेदप्सु चतुर्थशेषम्।

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पूतं यवानीफलबिल्वकुष्ठ-वचाशताह्वाघनपिप्पलीनाम्।। १४।।
कल्कैर्गुडक्षौद्रघृतैः सतैलैर्युतं सुखोष्णैस्तु पिचुप्रमाणैः।
गुडात् पलं द्विप्रसृतां तु मात्रां स्नेहस्य युक्त्या मधु सैन्धवं च।। १५।।
प्रक्षिप्य बस्तौ मथितं खजेन सुबद्धमुच्छ्वास्य च निर्वलीकम्।
अङ्गुष्ठमध्येन मुखं पिधाय नेत्राग्रसंस्थामपनीय वर्तिम्।। १६।।
तैलाक्तगात्रं कृतमूत्रविट्कं नातिक्षुधार्त्तं शयने मनुष्यम्।
समेऽथवेषन्नतशीर्षके वा नात्युच्छ्रिते स्वास्तरणोपपन्ने।। १७।।
सव्येन पार्श्वेन सुखं शयानं कृत्वर्जुदेहं स्वभुजोपधानम्।
सङ्कोच्य सव्येतरदस्य सक्थि वामं प्रसार्य प्रणयेत्ततस्तम्।। १८।।
स्निग्धे गुदे नेत्रचतुर्थभागं स्निग्धं शनैर्ऋज्वनु पृष्ठवंशम्।
अकम्पनावेपनलाघवादीन् पाण्योर्गुणांश्चापि विदर्शयंस्तम्।। १९।।
प्रपीड्य चैकग्रहणेन दत्तं नेत्रं शनैरेव ततोऽपकर्षेत्।

One *pala* each of *balā, guḍūcī, harītakī, vibhītaka, āmalakī, rāsnā, bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*, eight fruits of *madana* and half *tulā* (200 *tolās*) of goat-meat should be added with water, and boiled till one-fourth of water remains. Then the decoction should be collected by filtration. To this decoction, one *picu* (*tolā*) each of the paste of *yavānī, madana-phala, bilva, kuṣṭha, vacā, śatāhvā, ghana* and *pippalī*, one *pala* of jaggery, two *prasṛtas* each of ghee and oil, and appropriate quantities of honey and rock-salt should be added. The recipe should then be stirred with a stirrer (*khaja*), and kept inside the *basti* (enema-receptacle). The bladder (*basti* or enema receptacle) should then be tied to the base of the nozzle, the air inside the bladder should be taken out, and the bladder should be made free from wrinkles. Thereafter, *varti* (elongated plug) at the mouth (of the nozzle) should be removed, and the opening (in the mouth) should be covered with the middle part of the thumb.

The patient whose body is anointed with oil, who has passed urine and stool, and who is not very hungry should be made to sleep over a well spread, and not very high bed which

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is uniform in level or which is slightly low in level at the head-side.

The patient should sleep comfortably on his left side. He should keep his body straight, and use his folded left hand as pillow. He should then flex his right leg, keeping the left leg straight (fully extended).

The anus of the patient should be lubricated, and the lubricated nozzle should be inserted into it upto one fourth part from the top slowly and straight following the position of the vertibral column.

The physician should not shake or tremble his hand, and quickly compress the bladder (enema-receptacle) so that the recipe goes inside at one stretch. Thereafter, he should take out the nozzle slowly. [13 $^{2}/_{4}$ - $^{2}/_{4}$ 20]

The quantity of the seeds of *madana* is mentioned in the form of number (i.e. eight) instead of their weight.

The total quantity of ingredients for the preparation of decoction in the above mentioned recipe comes to 66 *palas* and eight seeds of *madana*. According to the general rule, the decoction (*kvātha*) should be equal in quantity to that of the ingredients (*kvāthya*). For each *basti*, ten *palas* of the decoction is to be used, and three such *bastis* are to be given in one course. Thus, in total, thirty *palas* of decoction are required for one course of three *bastis*. The quantity of decoction prepared according to above prescription far exceeds the actual requirement. The remaining quantity of decoction thus becomes useless. Since the quantity of drugs to be used for decoction in the above prescription is described by a Great Saint, it has to be prepared as such, and the physician need not change the recipe or bother about the residual as well as unusable quantity of decoction. This is made clear in *Sūtra* 26 : 13.

The situation can be explained in an alternative manner. The quantity of ingredients of the recipe given in the above text is by the way of illustration only. Keeping the same in view, the decoction can be prepared in the exact required quantity.

One *picu* (*tolā*) of the paste each of *yavāhī*, etc., should be added to one unit of recipe. [This quantity of the paste is not prescribed for the entire course of *basti* containing three units.]

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Addition of eight *tolās* each of ghee and oil is meant for a normal (*prakṛtistha*) individual. No fixed quantity of honey and rock-salt is prescribed to be added to the recipe because it will vary depending upon the *prakṛti* (physical constitution), etc., of the patient.

[In the verse no. 15, in the place of "*yuktyā madhusaindhavaṃ ca*", Cakrapāṇi had the text which is slightly different, i.e. "*yuktyā madhusaindhave ca*". This variant reading, however, does not make much difference in the meaning]. The use of '*ca*' at the end of the sentence implies that the quantity of meat-soup, milk, cow-urine, etc., to be added to the recipe will vary. The exact quantity in which these ingredients are to be added to the recipe, depending upon the *prakṛti* (physical constitution), etc., of the patient will be explained in the commentary on the verse nos. 30 $^{2}/_{4}$ - $^{2}/_{4}$ 31.

Before the administration of *basti*, the body of the patient is stated to be smeared with oil. In addition, the associated fomentation therapy should also be given to him. This is made clear in *Suśruta* : *Cikitsā* 38:3.

The patient, before the administration of *basti* therapy, is required to lie down over his left side over a bed which has uniform level or which is of low level in the head-side. These two alternatives are prescribed for the comfort of the patient. This can be explained in a different way also. If the patient has a bulky buttock, then he may sleep over a bed of uniform level. If he has a thin buttock, then the head-side of the bed should be lowered to facilitate the spread of enema-fluid uniformly all over the body.

The patient should lie down on his left side the reason for which will be described in the verse no. 23 $^{2}/_{4}$.

The enema- recipe should be administered in one stretch. If there is interruption, and the enema-receptacle is compressed again to push the remaining recipe into the rectum, then there is the possibility of air entering into the rectum which is not desirable.

Improper Administration of Basti

तिर्यक् प्रणीते तु न याति धारा गुदे व्रणः स्याच्चलिते तु नेत्रे।। २०।।
दत्तः शनैर्नाशयमेति बस्तिः कण्ठं प्रधावत्यतिपीडितश्च।
शीतस्त्वतिस्तम्भकरो विदाहं मूर्च्छां च कुर्यादतिमात्रमुष्णः।। २१।।
स्निग्धोऽतिजाड्यं पवनं तु रूक्षस्तन्वल्पमात्रालवणस्त्वयोगम्।
करोति मात्राभ्यधिकोऽतियोगं क्षामं तु सान्द्रः सुचिरेण चैति।। २२।।
दाहातिसारौ लवणोऽति कुर्यात्तस्मात् सुयुक्तं सममेव दद्यात्।

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If the nozzle is obliquely inserted, then the fluid will not flow into the rectum. If the nozzle is shifted from one place to the other, then this may cause anal ulcer. If the bladder is compressed slowly, then the enema-fluid may not reach the colon. If the bladder (*basti*) is strongly compressed, then the fluid may rush very fast [in the alimentary tract] even up to the throat. If the enema-fluid is very cold, then it may cause stiffness [of the body]. If the enema-fluid is very hot, then it may cause burning sensation and fainting. If the enema-fluid is very unctuous, then it may cause numbness [of the body]. If the enema-fluid is very ununctuous, then it may cause aggravation of *vāyu*. If the enema-fluid is very thin or added with less quantity of salt, then it may lead to *ayoga* (inadequate effect of the therapy). If the enema-fluid is administered in large quantity, then it may cause *ati-yoga* (over-action). If the enema-fluid is vicid (thick), then it may cause emaciation (weakness) of the patient, and it moves in the colon very slowly. If the enema-fluid contains salt in excess, then it may cause burning sensation and diarrhoea.

Therefore, *basti* should be properly and uniformly administered. [20 $^{2}/_{4}$ - $^{2}/_{4}$ 23]

If the nozzle is obliquely inserted, then the recipe gets obstructed by the sphincters, and therefore, the flow does not reach the desired place.

Order of Adding Ingredients of Different Categories

पूर्वं हि दद्यान्मधु सैन्धवं तु स्नेहं विनिर्मथ्य ततोऽनु कल्कम्।। २३।।
विमथ्य संयोज्य पुनर्द्रवैस्तं बस्तौ निदध्यान्मथितं खजेन।

In the beginning, honey and rock-salt should be added to the fat (ghee and oil) and stirred. Thereafter, the paste of drugs should be added and stirred again. To this, the liquid (decoction) should be added and stirred further with the help of a stirrer. This recipe should thereafter, be placed in the *basti* (enema-receptacle). [23 $^{2}/_{4}$ - $^{2}/_{4}$ 24]

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The above text, according to some scholars, is unauthentic. Since such a statement is found in other classics like *Suśruta* (*Cikitsā* 38 : 37), it appears to be appropriate.

Posture of Body During Enema

वामाश्रये हि ग्रहणीगुदे च तत् पार्श्वसंस्थस्य सुखोपलब्धिः।। २४।।
लीयन्त एवं वलयश्च तस्मात् सव्यं शयानोऽर्हति बस्तिदानम्।

As the *grahaṇī* (organ of assimilation, i.e. duodenum and upper part of the small intestine) and rectum are located in the left side of the body, administration of *basti* (enema) while the patient is lying in his left side endows pleasant benefits. Lying in the left side keeps the sphincters (*valayas*) submerged [into the surrounding musculature]. Therefore, *basti* should be given when the patient is lying in his left side. [24$^{2}/_{4}$ - $^{2}/_{4}$25]

When the patient lies in his left side, both the *grahaṇī* and *guda* remain in their natural position. *Basti* (enema) administered in this position gets absorbed properly and spreads easily. In this position, the sphincters (generally preventing passage of extraneous material) remain submerged into the surrounding musculature. Therefore, the enema-fluid enters into the rectum smoothly (without any obstruction), and impregnates the *grahaṇī* (small intestine) easily to produce the desired effect.

Management of Complications

विड्वातवेगो यदि चार्धदत्ते निष्कृष्य मुक्ते प्रणयेदशेषम्।। २५।।
उत्तानदेहश्च कृतोपधानः स्याद्वीर्यमाप्नोति तथाऽस्य देहम्।

While administering enema, if in the middle, the patient gets an urge to void feces or flatus, then the nozzle should be taken out, and after the patient has voided stool or flatus, the ramaining enema-fluid should be injected. The patient should thereafter, be made to lie down on his back with a pillow below his head. By doing so, his body gets envigorated with the effect of enema. [25 $^{2}/_{4}$ - $^{2}/_{4}$ 26]

Effects of Three Enemas

एकोऽपकर्षत्यनिलं स्वमार्गात् पित्तं द्वितीयस्तु कफं तृतीयः।। २६।।

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The first enema helps in the elimination of *vāyu*, the second enema helps in the elimination of *pitta*, and the third enema helps in the elimination of *kapha* from their own channels. [26 $^{2}/_{4}$]

For the aggravated *vāyu*, one *basti* should be given; for the aggravated *pitta*, two *bastis* should be given; and for the aggravated *kapha*, three *bastis* should be given. It is not that for *tri-doṣa* (aggravation of all three *doṣas*), the first *basti* eliminates *vāyu*, the second *pitta*, and the third, *kapha*. The author himself will explain the need for giving one *basti* for *vāyu*, two *bastis* for *pitta*, and three *bastis* for *kapha* (vide verse no. 69). Thus, one *basti* eliminates aggravated *vāyu* from its location, two of them (given one after the other) eliminate *pitta* from its location, and three of them (given one after the other) eliminate *kapha* from its location.

Basti is given to eliminate the aggravated *vāyu* from *pakvāśaya* (colon). But as a specific effect, this *basti* is also capable of eliminating aggravated *doṣas* even from the locations of *pitta* and *kapha*. Thus, in general, *basti* eliminates the *doṣa* from *pakvāśaya* (colon). But by the application of special methods, this *basti* becomes capable of eliminating *doṣas* located in the other parts. The description of the effect of *basti* in *Hārīta-saṃhitā* may be explained accordingly inasmuch as the second and the third *basti* eliminate *pitta* and *kapha* respectively from their respective habitats.

Basti is, no doubt, not the most effective therapy for aggravated *pitta* and *kapha*. But this is very effective only when these two *doṣas* are associated with the aggravated *vāyu*. Keeping this in view, Suśruta has described *basti* to be effective in *vāyu*, *pitta*, *kapha* as well as *rakta* (vide *Suśruta* : *Cikitsā* 35 : 6).

Post-therapeutic Measures

प्रत्यागते कोष्णजलावसिक्तः शाल्यन्नमद्यात्तनुना रसेन।
जीर्णे तु सायं लघु चाल्पमात्रं भुक्तोऽनुवास्यः परिबृंहणार्थम्।। २७।।
निरूहपादांशसमेन तैलेनाम्लानिलघ्नौषधसाधितेन।
दत्त्वा स्फिचौ पाणितलेन हन्यात् स्नेहस्य शीघ्रागमरक्षणार्थम्।। २८।।
ईषच्च पादाङ्गुलियुग्ममाञ्छेदुत्तानदेहस्य तलौ प्रमृज्यात्।
स्नेहेन पाष्ण्यर्ङ्गुलिपिण्डिकाश्च ये चास्य गात्रावयवा रुगार्ताः।। २९।।
तांश्चावमृद्नीत सुखं ततश्च निद्रामुपासीत कृतोपधानः।

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After the enema-fluid has returned, the patient should be sprinkled with tepid water, and thereafter, given the diet containing *śāli*-rice along with thin meat-soup.

In the evening, after the previous meal is digested, the patient should be given light food in small quantity. Thereafter, *anuvāsana-basti* (unctuous enema) should be given to the patient for all round nourishment of his body.

For *anuvāsana-basti*, medicated oil cooked by adding sour and *vāyu*-alleviating drugs should be used. This oil should be one-fourth in quantity of the fluid used for *nirūha-basti*. After the administration of oil, the buttocks of the patient should be tapped (pressed) with the palms to prevent early return of the recipe (medicated oil) from the anus.

The patient should lie on the bed in supine position, and the toe-joints of both of his legs should be pulled gently. The soles of his feet should be massaged with oil. His heels, toes, calf regions and such other parts which are painful should also be massaged with the oil. Thereafter, the patient should sleep comfortably by keeping his head over a pillow (and he should not do any other work). [27 - $^{2}/_{4}$ 30]

By the administration of *nirūha-basti*, the inner wall of the intestine gets smeared with the recipe-fluid. After the intake of *śāli*-rice, etc., and after it gets digested in this intestine, he should be given light diet in small quantity in the evening.

The patient is suggested to take thin meat-soup, etc., after *nirūha-basti* to protect his *agni* (digestive power) which is slightly subdued because of the therapy. After the emetic therapy, the patient is advised (*Siddhi* 1 : 11) to take *peyā*, etc., as restorative diet (*saṃsarjana-krama*). This type of restorative or regulated diet is not necessary after purgation therapy as well as *nirūha-basti*. On the other hand, after *nirūha*, the patient should be given *rasa* (meat-soup), etc., in the place of *peyā* (thin gruel), etc., which is clearly explained in *Suśruta* : *Cikitsā* 38 : 12.

Nirūha-basti has *lekhana* (scraping) property. Therefore, after this type of *basti*, the patient needs nourishing therapy to overcome this *lekhana* effect, and this is done by the administration of *anuvāsana-*

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basti or unctuous type of medicated enema. This is emphasised in *Siddhi* 1 : $^{2}/_{4}$22 of this work and also in *Jatūkarṇa-saṃhitā*.

For *anuvāsana-basti, sneha* (fat) which is 1/4th in quantity of the recipe of *nirūha-basti* is to be used. For *nirūha-basti,* 24 *palas* of enema-liquid is to be used. [In the commentary on verse nos. 13-30 of this chapter, ten *palas* of the decoction, 2 *palas* of the paste, 1 *pala* of jaggery, two *palas* each of oil and ghee and appropriate quantity of honey, salt and meat-soup, etc., are stated to be used for *nirūha-basti*]. Therefore, for *anuvāsana-basti*, six *palas* of fat are to be used. It is stated in other authentic works that for *anuvāsana-basti*, there are three different types of dosage : the dose of six *palas* is the optimum, the dose of three *palas* is the medium, and the dose of one and half *palas* is the minimum. *Suśruta* has also described the dose of *anuvāsana-basti* according to three different types of *mātrā-basti* in the same manner (vide *Suśruta* : *Sūtra* 35 : 18).

Proportion of Ingredients in Basti-recipe

भागाः कषायस्य तु पञ्च, पित्ते स्नेहस्य षष्ठः प्रकृतौ स्थिते च।। ३०।।
वाते विवृद्धे तु चतुर्थभागो, मात्रा निरूहेषु कफेऽष्टभागः।

In the recipe of *nirūha-basti* (total quantity : twelve *prasṛtas* or 24 *palas*), the decoction should be five parts (five *prasṛtas* or ten *palas*). If this is intended to be given to a patient suffering from *paittika* disease or to a healthy person, then the quantity of *sneha* should be one-sixth of the total quantity (i.e. two *prasṛtas* or four *palas*). For *vātika* diseases, the quantity of *sneha* (fat) should be one-fourth of the total quantity (i.e. three *prasṛtas* or six *palas*). For *kaphaja* diseases, the quantity of *sneha* should be 1/8th of the total quantity (i.e. $1^{1}/_{2}$ *prasṛtas* or three *palas*). [30 $^{2}/_{4}$ - $^{2}/_{4}$ 31]

The above mentioned ratio of the decoction and *sneha* (fat) should be maintained even if the *nirūha-basti* is administered in minimum quantity. Apart from the decoction and fat, the recipe of *nirūha* also contains honey, paste of drugs, rock-salt, etc. The quantity in which these additional ingredients are to be used is variable depending upon the *prakṛti* (physical constitution), etc., of the patient. However, the quantity of such ingredients should be such as to make the whole recipe twelve *prasṛtas* (twenty four *palas*) in total.

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Jatūkarṇa has prescribed two *palas* of the paste (*kalka*) to be added to the recipe of *nirūha*. According to him, in the recipe, six *palas* of oil should be added for *vātika* diseases and for a healthy persons; four *palas* of ghee should be added for *paittika* diseases; and three *palas* of oil should be added for *kaphaja* diseases. In addition, one *karṣa* (*tolā*) of rock-salt should be used in this recipe.

Suśruta (*Cikitsā* 38 : 37) has described one *akṣa* ($^1/_2$ *pala*) of rock-salt, and 2 *prasṛtas* (four *palas*) of honey should be added to the recipe of *nirūha*.

Hārīta has prescribed one *prasṛta* (two *palas*) of honey, and one *akṣa* ($^1/_2$ *pala*) of rock-salt to be added to this recipe.

The exact quantity of honey and rock-salt to be added to the recipe should be determined keeping the various opinions quoted above.

In addition to decoction, fat, paste, honey and rock-salt, *āvāpas* (ingredients which are added later), viz., meat-soup, milk, cow's urine, etc., are to be added in such quantity so as to make the whole recipe of *nirūha* twelve *palas* in total. These *āvāpas* are not described in the above text, and will be described later in the verse no. 69. Use of these *āvāpas* is also described in *Hārīta-saṃhitā*.

In another work (*Suśruta* : *Cikitsā* 38 : 37-39), the exact quantity of these ingredients of different categories are described to be added as follows :

(1) Rock-salt	one *akṣa* (*tolā* = $^1/_2$ *prasṛta*);
(2) Honey	two *prasṛtas* (one *prasṛta* = 2 *palas*);
(3) Fat	3 *prasṛtas* ;
(4) Paste	1 *prasṛta*;
(5) Decoction	4 *prasṛtas*; and
(6) *Āvāpa*	2 *prasṛtas*

Thus, in total, the quantity of the recipe becomes $12^1/_2$ *prasṛtas* which is rounded to 12 *prasṛtas*. This recipe is meant for *vātika* diseases.

In the present text of *Caraka*, five *prasṛtas* of the decoction is stated to be added. In *Suśruta*, the quantity of decoction is reduced to 4 *prasṛtas*. This change in the quantity of decoction is not acceptable. [There appears to be a printing error in the text of Cakrapāṇi according to which this change in the quantity is acceptable.]

Another text provides the proportion of these ingredients for different *doṣas* as follows :

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Ingredients	Quantity in *palas* for *Vāta*	Quantity in *palas* for *pitta*	Quantity in *palas* for *kapha*
(1) Honey	3	4	6
(2) Fat	6	4	3
(3) Paste	2	2	2
(4) Decoction	10	10	10
(5) *Āvāpa*	3	4	3
Total	24 *palas* or 12 *prasṛtas*	24 *palas* or 12 *prasṛtas*	24 *palas* or 12 *prasṛtas*

The above mentioned description is acceptable as it is on the line suggested in *Caraka-saṃhitā.*

Dose of Nirūha-basti for Different Age-groups

निरूहमात्रा प्रसृतार्धमाद्ये वर्षे ततोऽर्धप्रसृताभिवृद्धिः।। ३१।।
आद्वादशात् स्यात् प्रसृताभिवृद्धिरष्टादशाद् द्वादशतः परं स्युः।
आसप्ततेस्तद्विहितं प्रमाणमतः परं षोडशवद्विधेयम्।। ३२।।
निरूहमात्रा प्रसृतप्रमाणा बाले च वृद्धे च मृदुर्विशेषः।

For the patient one year old, the dose of *nirūha*-recipe should be half *prasṛta* (one *pala*). Thereafter, for each year of age, the dose should be increased by half *prasṛta* upto twelve years. [For the patient of twelve years old, the dose of *nirūha*-recipe should, therefore, be six *prasṛtas*.]

After twelve years of age, the dose of *nirūha* should be increased by one *prasṛta* for each year (of age) till eighteenth year of age. [For the patient of eighteen years old, the dose of *nirūha* should therefore be twelve *prasṛtas*, which is maximum dose]. This dose of *nirūha* is prescribed upto the age of seventy. After that age of seventy, the dose of *nirūha* should be like that of a patient of sixteen years, i.e. ten *prasṛtas*.

Thus, the dose of *nirūha* is described for patients of different age-groups in terms of *prasṛta*.

For infants and old people, the ingredients of enema-recipe should be specifically mild in nature.[31 $^{2}/_{4}$ - $^{2}/_{4}$ 33]

The maximum dose of *nirūha* should be twelve *prasṛtas*. Hārīta

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and even Suśruta have quoted the opinion of others who recommend increase of this dose. But increasing this dose, though recommended by some is prohibited according to this text because this may lead to serious adverse effects.

For infants and old persons, the ingredients to be used in the enema-recipe should be of mild nature. Ingredients like urine, *pīlu, agni (citraka)*, salt, alkalies and mustard are sharp in nature. On the other hand, milk, etc., are mild in nature. [*Siddhi* 7 : 63]

Bed to be Used After Therapy

नात्युच्छ्रितं नाप्यतिनीचपादं सपादपीठं शयनं प्रशस्तम्।। ३३।।
प्रधानमृद्वास्तरणोपपन्नं प्राक्शीर्षकं शुक्लपटोत्तरीयम्।

After the administration of the therapy is over, the patient should lie down on a bed which is neither too high nor with too low pedestal. This bed should have a foot-rest, and should be spread with an adequately big and soft mattress. The patient should lie with his head towards the east, and cover himself with a white linen. [33 $^{2}/_{4}$ - $^{2}/_{4}$ 34]

The process of lying over the bed described earlier in verse nos. 17-18 is related to the position of the patient during the administration of *nirūha* therapy. The present text, however, describes the position (bed) in which the patient should lie down after the administration of the therapy in special.

The patient should lie over the bed with his head towards the east because that direction is the abode of the gods, and prayer (while he is lying down) should be offered to them in that direction (vide *Suśruta : Sūtra* 19 : 6).

Diet to be Given After Therapy

भोज्यं पुनर्व्याधिमवेक्ष्य तद्वत् प्रकल्पयेद्यूषपयोरसाद्यैः।। ३४।।
सर्वेषु विद्याद्विधिमेतमाद्यं वक्ष्यामि बस्तीनत उत्तरीयान्।

The diet of the patient [after the therapy] should be determined on the basis of the nature of his disease. It should consist of vegetable-soup, milk, meat-soup, etc. This is the primary and general principle to be followed in all the conditions. Hereafter, the recipes for the *nirūha-basti* will be described. [34 $^{2}/_{4}$ - $^{2}/_{4}$ 35]

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Depending upon the nature of the disease, the patient is stated above to be given vegetable-soup, milk, meat-soup, etc. These specified three items of food may be given to the patients suffering from *kaphaja*, *paittika* and *vātika* diseases respectively. Alternatively, these items of diet can be given appropriately on the basis of *agni* (power of digestion) of the patient.

Different items of diet described in the above text are of primary and general nature. Exceptions to this general rule in special circumstances are possible.

Recipe of Nirūha (First Recipe)

द्विपञ्चमूलस्य रसोऽम्लयुक्तः सच्छागमांसस्य सपूर्वपेष्यः।। ३५।।
त्रिस्नेहयुक्तः प्रवरो निरूहः सर्वानिलव्याधिहरः प्रदिष्टः।

The recipe containing decoction of *bilva*, *śyonāka*, *gambhārī*, *pāṭalā*, *gaṇikārikā*, *śāla-parṇī*, *pṛśni-parṇī*, *bṛhatī*, *kaṇṭakārī* and *gokṣura* should be added with sour juice, soup of goat-meat, the paste of drugs described earlier in the verse no. 13 (viz., *balā*, *guḍūcī*, *harītakī*, *vibhītaka*, *āmalakī*, *rāsnā*, *bilva*, *śyonāka*, *gambhārī*, *pāṭalā*, *gaṇikārikā*, *śāla-parṇī*, *pṛśni-parṇī*, *bṛhatī*, *kaṇṭakārī* and *gokṣura*), and three types of fat (ghee, oil and muscle-fat) is excellent for *nirūha-basti* to be given for curing all the diseases caused by aggravated *vāyu*. [35 $^{2}/_{4}$ - $^{2}/_{4}$ 36]

[The term "..*pūrva-peṣyaḥ*" meaning "the paste described earlier" has been interpreted by Cakrapāṇi as the paste of *balā*, etc., described in the earlier verse no. 13. This perhaps, more appropriately refers to the paste of *yavānī*, etc., described in the verse no. 14.]

There are four types of fat, viz., ghee, oil, *vasā* (muscle fat) and *majjā* (bone-marrow). Bone-marrow is not useful for *basti*. Hence, the remaining three types of fat are to be used in the recipe for *nirūha*.

Second Recipe of Nirūha

स्थिरादिवर्गस्य बलापटोलत्रायन्तिकैरण्डयवैर्युतस्य।। ३६।।
प्रस्थो रसाच्छागरसार्धयुक्तः साध्यः पुनः प्रस्थसमस्तु यावत्।
प्रियङ्गुकृष्णाघनकल्कयुक्तः सतैलसर्पिर्मधुसैन्धवश्च।। ३७।।
स्याद्दीपनो मांसबलप्रदश्च चक्षुर्बलं चापि ददाति बस्तिः।

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One *prastha* of the decoction of drugs belonging to *Sthirādi*-group (*sthirā* or *vidāri-gandhā, pṛśni-parṇī, bṛhatī, kaṇṭakārī, eraṇḍa, kākolī, candana, uśīra, elā* and *madhuka*-vide *Sūtra* 4 : 17), *balā, paṭola, trāyantikā, eraṇḍa* (it is a repetition -vide com.) and *yava,* and half a *prastha* of the soup of goat-meat should be cooked together till one *prastha* of the liquid remains. To this, the paste of *priyaṅgu, kṛṣṇā* and *ghana*, oil, ghee, honey and rock-salt should be added, and used for enema. It stimulates the power of digestion, provides strength to the muscle-tissue and even promotes the strength of the eyes (eye-sight). [36 $^{2}/_{4}$ - $^{2}/_{4}$ 38]

Honey and rock-salt are prescribed to be added to all the recipes for enema in general. Their repetition in the above text indicates that oil, etc., are to be used in this recipe in large quantity. [There seems to be an error in "*tailādīnāmatrāprakarṣārthaṃ*". It should have been "*tailādīnām mātrāprakarṣārthaṃ*".] Alternatively, the repetition here is just to remind the use of these ingredients prescribed in the general method for the preparation of *nirūha*-recipe.

Repetitions of this nature in other places are also to be explained on the above line.

Third Recipe of Nirūha (Eraṇḍa-basti)

एरण्डमूलं त्रिपलं पलाशा ह्रस्वानि मूलानि च यानि पञ्च।। ३८।।
रास्नाश्वगन्धातिबलागुडूचीपुनर्नवारग्वधदेवदारु ।
भागाः पलांशा मदनाष्टयुक्ता जलद्विकंसे क्वथितेऽष्टशेषे।। ३९।।
पेष्याः शताह्वा हपुषा प्रियङ्गुः सपिप्पलीकं मधुकं बला च।
रसाञ्जनं वत्सकबीजमुस्तं भागाक्षमात्रं लवणांशयुक्तम्।। ४०।।
समाक्षिकस्तैलयुतः समूत्रो बस्तिर्नृणां दीपनलेखनीयः।
जङ्घोरुपादत्रिकपृष्ठशूलं कफावृतिं मारुतनिग्रहं च।। ४१।।
विण्मूत्रवातग्रहणं सशूलमाध्मानतामश्मरिशर्करे च।
आनाहमर्शोग्रहणीप्रदोषानेरण्डबस्तिः शमयेत् प्रयुक्तः।। ४२।।

Three *palas* of the root of *eraṇḍa,* one *pala* each of the pastes of *palāśa* (*śaṭī*), *śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī, gokṣura, rāsnā, aśvagandhā, ati-balā, guḍūcī, punarnavā, āragvadha* and *devadāru,* and the paste of eight

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seeds of *madana* should be added with two *kaṃsas* (512 *tolās*) of water and boiled till one-eighth of the liquid remains. To this decoction, the paste of one *akṣa* or *tolā* each of *śatāhvā, hapuṣā, priyaṅgu, pippalī, madhuka, balā, rasāñjana,* seeds of *vatsaka* and *musta* along with appropriate quantity of rock-salt, honey, oil and cow's urine should be added.

Administration of this recipe as enema is *dīpanīya* (stimulant of the power of digestion) and *lekhanīya* (which scraps out the morbid matter from the body). Administration of the *Eraṇḍa-basti* cures pain in the calf region, thighs, feet, lumber region and back, *kaphāvṛti* (occlusion of *vāyu* by *kapha*), *māruta-nigraha* (immobility of *vāyu*), obstruction to the voiding of stool, urine and flatus associated with pain, *ādhmānatā* (tymphanites), *aśmarī* (stone in the urinary tract), *śarkarā* (graveluria), *ānāha* (constipation), *arśas* (piles) and *grahaṇī-doṣa* (sprue syndrome). [38 $^{2}/_{4}$ - 42]

Fourth Recipe of Nirūha

चतुष्पले तैलघृतस्य भृष्टाच्छागाच्छतार्धो दधिदाडिमाम्लः।
रसः सपेष्यो बलमांसवर्णरितोग्निदश्चान्ध्यशिरोर्तिशस्तः।। ४३।।

Fifty *palas* of the soup of goat-meat should be sizzled with four *palas* of ghee and oil, made sour by adding *dadhi* (yoghurt) and *dāḍima,* and added with the paste (of *balā,* etc. described earlier in verse no. 13).

Use of this recipe for enema promotes strength, muscles, complexion, semen and *agni* (power of digestion as well as metabolism), and cures blindness as well as headache.[43]

[Cakrapāṇi has prescribed the use of the paste of *balā,* etc., described in the verse no. 13. Use of the paste of *yavānī,* etc., described in the verse no. 14 appears to be more appropriate.]

Fifth Recipe of Nirūha

जलद्विकंसेऽष्टपलं पलाशात् पक्त्वा रसोऽर्धाढकमात्रशेषः।
कल्कैर्वचामागधिकापलाभ्यां युक्तः शताह्वाद्विपलेन चापि।। ४४।।
ससैन्धवः क्षौद्रयुतः सतैलो देयो निरूहो बलवर्णकारी।
आनाहपार्श्वामययोनिदोषान् गुल्मानुदावर्तरुजं च हन्यात्।। ४५।।

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Eight *palas* of *palāśa* should be added with two *kaṃsas* (128 *palas*) of water, and boiled till the liquid is reduced to half *āḍhaka* (32 *palas*). To this decoction, the paste of one *pala* each of *vacā* and *māgadhikā*, and two *palas* of *śatāhvā* along with rock-salt, honey and oil should be added. This recipe should be used for *nirūha*.

It promotes strength and complexion. It cures *ānāha* (constipation), *pārśvāmaya* (pain in the sides of the chest), *yoni-doṣa* (gynecic diseases), *gulma* (phantom tumour) and *udāvarta* (upward movement of wind in the abdomen).[45]

Sixth Recipe of Nirūha

यष्ट्याह्वयस्याष्टपलेन सिद्धं पयः शताह्वाफलपिप्पलीभिः।
युक्तं ससर्पिर्मधु वातरक्तवैस्वर्यवीसर्पहितो निरूहः।। ४६।।

Milk boiled by adding eight *palas* of *yaṣṭi-madhu* should be mixed with [the paste] of *śatāhvā, phala* (*madana-phala*) and *pippalī,* ghee and honey. Administration of this recipe in the form of *nirūha-basti* cures *vāta-rakta* (gout), *vaisvarya* (hoarseness of voice) and *visarpa* (erysipelas). [46]

The first five recipes of *nirūha* described before are for the treatment of *vātika* diseases. The present one and the subsequent three recipes (total four : from sixth to ninth) are for the diseases caused by *pitta.*

Yaṣṭi-madhu is described in the above text to be boiled by adding milk. For this purpose, the method prescribed for *kṣīra-pāka* (cooking with milk) is to be followed.

Seventh Recipe of Nirūha

यष्ट्याह्वलोध्राभयचन्दनैश्च शृतं पयोऽग्र्यं कमलोत्पलैश्च।
सशर्करं क्षौद्रयुतं सुशीतं पित्तामयान् हन्ति सजीवनीयम्।। ४७।।

The milk boiled with *yaṣṭi-madhu, lodhra, abhaya* (*uśīra*), *candana, kamala* and *utpala* should be added with sugar as well as honey, and cooled. To this, the [paste] of drugs belonging to *Jīvanīya*-group (*jīvaka, ṛṣabhaka, medā, mahā-medā, kākolī, kṣīra-kākolī, mudga-parṇī, māṣa-parṇī, jīvantī* and *madhuka* : vide *Sūtra* 4 : 9) should be added.

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Nirūha-basti administered with this recipe cures diseases caused by aggravated *pitta*. [47]

This recipe is prescribed to be used after cooling. In general, cold recipes are useful for persons having laxed bowel, and for diseases caused by aggravated *pitta*. On the same line, other recipes for *paittika* diseases should be used in cold form.

Eighth Recipe of Nirūha

द्विकार्षिकाश्चन्दनपद्मकर्धि-यष्ट्याह्वरास्नावृषसारिवाश्च ।
सलोध्रमञ्जिष्ठमथाप्यनन्ता-बलास्थिरादितृणपञ्चमूलम् ।। ४८ ।।
तोये समुत्क्वाथ्य रसेन तेन श्रृतं पयोऽर्धाढकमम्बुहीनम् ।
जीवन्तिमेदर्धिशतावरीभिर्वीराद्विकाकोलिकशेरुकाभिः ।। ४९ ।।
सितोपलाजीवकपद्मरेणुप्रपौण्डरीकैः कमलोत्पलैश्च ।
लोध्रात्मगुप्तामधुकैर्विदारीमुञ्जातकैः केशरचन्दनैश्च ।। ५० ।।
पिष्टैर्घृतक्षौद्रयुतैर्निरूहं ससैन्धवं शीतलमेव दद्यात् ।
प्रत्यागते धन्वरसेन शालीन् क्षीरेण वाऽद्यात् परिषिक्तगात्रः ।। ५१ ।।
दाहातिसारप्रदरास्रपित्त-हृत्पाण्डुरोगान् विषमज्वरं च ।
सगुल्ममूत्रग्रहकामलादीन् सर्वामयान् पित्तकृतान्निहन्ति ।। ५२ ।।

Two *karṣas* (*tolās*) each of *candana, padmaka, ṛddhi, yaṣṭi-madhu, rāsnā, vṛṣa, sārivā, lodhra, mañjiṣṭhā, anantā* (*utpala-sārivā*), *balā, vidārī-gandhā, pṛśni-parṇī, bṛhatī, kaṇṭakārikā, eraṇḍa, kākolī, candana, uśīra, elā, madhuka* (vide *Sūtra* 4 : 17), *śāli, kāśa, śara, darbha* and *ikṣu* (vide *Cikitsā* 1 : 1 : 44) should be boiled by adding water.

To this decoction, half *āḍhaka* (72 *palas*) of milk should be added and boiled till the moisture content of the liquid gets evaporated, i.e. only 72 *palas* of milk remains. Thereafter, to this milk, the paste of *jīvanti, medā, ṛddhi, śatāvarī, vīrā, kākolī, kṣīra-kākolī, kaśerukā, sitopalā* (crystal sugar), *jīvaka*, anthors of lotus, *prapauṇḍarīka, kamala, utpala, lodhra, ātmaguptā, madhuka, vidārī, muñjātaka, keśara* and *candana* along with ghee, honey and small quantity of rock-salt should be added. This recipe, when cold, should be given as *nirūha-basti*.

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After the return of enema-fluid, the patient's body should be sprinkled with water, and he should be given *śāli* type of rice either with meat of animals inhabiting arid zone (*jāṅgala-māṃsa*) or milk.

This type of enema cures *dāha* (burning sensation), *atisāra* (diarrhoea), *pradara* (menorrhagia), *rakta-pitta* (an ailment characterised by bleeding from different parts of the body), *hṛd-roga* (heart-diseases), *pāṇḍu-roga* (anemia), *viṣama-jvara* (irregular fever), *gulma* (phantom tumour), *mūtra-graha* (anuria), *kāmalā* (jaundice), etc., and all the other diseases caused by aggravated *pitta*. [48 - 52]

Ninth Recipe of Nirūha

द्राक्षादिकाश्मर्यमधूकसेव्यैः ससारिवाचन्दनशीतपाक्यैः।
पयः शृतं श्रावणिमुद्गपर्णी-तुगात्मगुप्तामधुयष्टिकल्कैः।। ५३।।
गोधूमचूर्णेश्च तथाऽक्षमात्रैः सक्षौद्रसर्पिर्मधुयष्टितैलैः।
पथ्याविदारीक्षुरसैर्गुडेन बस्तिं युतं पित्तहरं विदध्यात्।। ५४।।
हृन्नाभिपार्श्वोत्तमदेहदाहे दाहेऽन्तरस्थे च सकृच्छ्रमूत्रे।
क्षीणे क्षते रेतसि चापि नष्टे पैत्तेऽतिसारे च नृणां प्रशस्तः।। ५५।।

Milk boiled with *drākṣā* (and such other sweet ingredients), *kāśmarya, madhūka, sevya, sārivā, candana* and *śītapākī* (*śītalī*) should be added with the paste of one *karṣa* (*tolā*) each of *śrāvaṇi, mudga-parṇī, tugākṣīrī, ātmaguptā* and *madhu-yaṣṭi* as well as with one *akṣa* of wheat-flour. To this, honey, ghee, *madhu-yaṣṭi,* oil, *harītakī, vidārī,* sugarcane-juice and jaggery should be added and given as *basti* (medicated enema). This alleviates aggravated *pitta*. It is an excellent remedy for the patients suffering from burning sensation in the cardiac region, umbilicus, sides of the chest, head and the interior part of the body, *mūtra-kṛcchra* (dysuria), *kṣīṇa* (consumption), *kṣata* (phthisis), loss of semen and *paittika* type of diarrhoea. [53 - 55]

Tenth Recipe of Nirūha

कोषातकारग्वधदेवदारु-शार्ङ्गेष्टमूर्वाकुटजार्कपाठाः ।

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पक्त्वा कुलत्थान् बृहतीं च तोये रसस्य तस्य प्रसृता दश स्युः।।५६।।
तान् सर्षपैलामदनैः सकुष्ठैरक्षप्रमाणैः प्रसृतैश्च युक्तान्।
फलाह्वतैलस्य समाक्षिकस्य क्षारस्य तैलस्य च सार्षपस्य।।५७।।
दद्यान्निरूहं कफरोगिणे ज्ञो मन्दाग्नये चाप्यशनद्विषे च।

Ten *prasṛtas* (one *prasṛta* = two *palas*) of decoction should be prepared by boiling *koṣātaka, āragvadha, devadāru, śārṅgeṣṭā* (*guñjā*), *mūrvā, kuṭaja, arka, pāṭhā, kulattha* and *bṛhatī* with water. To this, the paste of one *akṣa* each of *sarṣapa, elā, madana* and *kuṣṭha*, and one *prasṛta* each of *madana-phala,* oil, honey, *kṣāra* (alkali preparation) and mustard oil should be added. An expert physician should use this recipe as *nirūha-basti* for the patients suffering from diseases caused by aggravated *kapha, mandāgni* (suppression of the power of digestion) and *aśana-dveṣa* (aversion for food). [56 - $^{2}/_{4}$ 58]

Recipe nos. ten to thirteen are for the patients suffering from diseases caused by aggravated *kapha.*

The quantity of ingredients of this recipe described above exceeds the prescribed limit of twelve *prasṛtas* in total. Use of the recipe which is more than twelve *prasṛtas* in quantity is prohibited. Therefore, these ingredients are to be taken in the prescribed ratio so that the total quantity does not exceed the limit of twelve *prasṛtas* in total.

Eleventh Recipe of Nirūha

पटोलपथ्यामरदारुभिर्वा सपिप्पलीकैः क्वथितैर्जलेऽग्नौ।।५८।।

Alternatively, water should be boiled over fire by adding *paṭola, pathyā, deva-dāru* and *pippalī*. [With this decoction, enema should be given according to the procedure described for the tenth recipe.] [58 $^{2}/_{4}$]

Twelfth Recipe of Nirūha

द्विपञ्चमूले त्रिफलां सबिल्वां फलानि गोमूत्रयुतः कषायः।
कलिङ्गपाठाफलमुस्तकल्कः ससैन्धवः क्षारयुतः सतैलः।।५९।।
निरूहमुख्यः कफजान् विकारान् सपाण्डुरोगालसकामदोषान्।
हन्यात्तथा मारुतमूत्रसङ्गं बस्तेस्तथाऽऽटोपमथापि घोरम्।।६०।।

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To the decoction of *bilva* (root), *śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī, gokṣura, harītakī, bibhītaka, āmalakī, bilva* (fruit) and *madana-phala* and *musta* prepared by adding cow's urine, the paste of *kaliṅga, pāṭhā, madana-phala* should be added. This recipe should be mixed with rock-salt, *kṣāra* (*yava-kṣāra* : an alkali preparation) and oil, and used for *nirūha-basti*. It is excellent for curing diseases caused by aggravated *kapha, pāṇḍu-roga* (anemia), *alasaka* (intestinal torpor), ailments caused by *āma* (product of improper digestion and metabolism), obstruction to the voiding of flatus as well as urine, and serious type of bladder distension. [59 - 60]

Thirteenth Recipe of Nirūha

रास्नामृतैरण्डविडङ्गदार्वी-सप्तच्छदोशीरसुराह्वनिम्बैः ।
शम्पाकभूनिम्बपटोलपाठातिक्ताखुपर्णीदशमूलमुस्तैः ।। ६१ ।।
त्रायन्तिकाशिग्रुफलत्रिकैश्च क्वाथः सपिण्डीतकतोयमूत्रः ।
यष्ट्याह्वकृष्णाफलिनीशताह्वा-रसाञ्जनश्वेतवचाविडङ्गैः ।। ६२ ।।
कलिङ्गपाठाम्बुदसैन्धवैश्च कल्कैः ससर्पिर्मधुतैलमिश्रः ।
अयं निरूहः क्रिमिकुष्ठमेह-ब्रध्नोदराजीर्णकफातुरेभ्यः ।। ६३ ।।
रूक्षौषधैरप्यपतर्पितेभ्य एतेषु रोगेष्वपि सत्सु दत्तः ।
निहत्य वातं ज्वलनं प्रदीप्य विजित्य रोगांश्च बलं करोति ।। ६४ ।।

To the decoction of *rāsnā, amṛtā, eraṇḍa, viḍaṅga, dāru-haridrā, saptacchada, uśīra, surāhva, nimba, śampāka, bhūnimba, paṭola, pāṭhā, tikta, ākhu-parṇī, bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī, gokṣura, musta, trāyantikā, śigru, harītakī, vibhītaka, āmalakī,* the decoction of *piṇḍītaka* (*madana-phala*) and *mūtra* (cow's urine) should be added. To this liquid, the paste of *madhu-yaṣṭi, kṛṣnā* (*pippalī*), *phalinī, śatāhvā, rasāñjana, śveta-vacā, viḍaṅga, kaliṅga, pāṭhā, ambuda* (*musta*) and rock-salt along with ghee, honey and oil should be added.

Administration of this recipe for *nirūha-basti* cures *kṛmi*

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(intestinal parasites), *kuṣṭha* (obstinate skin diseases including leprosy), *meha* (obstinate urinary disorders including diabetes), *bradhna* (inguinal swelling), *udara* (obstinate abdominal diseases including ascites), *ajīrṇa* (indigestion) and diseases caused by *kapha*. Administration of this *nirūha-basti* to the aforesaid patients who are emaciated because of the use of ununctuous medicines alleviates *vāyu*, stimulates *agni* (power of digestion and metabolism), cures diseases and promotes strength. [61-64]

Recipe of Nirūha for Combined Doṣas

पुनर्नवैरण्डवृषाश्मभेद-वृश्चीरभूतीकबलापलाशाः ।
द्विपञ्चमूलं च पलांशिकानि क्षुण्णानि धौतानि फलानि चाष्टौ ।। ६५ ।।
बिल्वं यवान् कोलकुलत्थधान्य-फलानि चैव प्रसृतोन्मितानि ।
पयोजलद्व्याढकवच्छृतं तत् क्षीरावशेषं सितवस्त्रपूतम् ।। ६६ ।।
वचाशताह्वामरदारुकुष्ठयष्ट्याह्वसिद्धार्थकपिप्पलीनाम् ।
कल्कैर्यवान्या मदनैश्च युक्तं नात्युष्णशीतं गुडसैन्धवाक्तम् ।। ६७ ।।
क्षौद्रस्य तैलस्य च सर्पिषश्च तथैव युक्तं प्रसृतैस्त्रिभिश्च ।
दद्यान्निरूहं विधिना विधिज्ञः स सर्वसंसर्गकृतामयघ्नः ।। ६८ ।।

One *pala* each of *punarnavā* (red variety), *eraṇḍa, vṛṣa* (*vāsaka*), *aśmabheda* (*pāṣāṇa-bheda*), *vṛścīra* (*śveta* or white variety of *punarnavā*), *bhūtīka, balā, palāśa, bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura* and eight fruits of *madana-phala* should be cut into pieces and washed. To this, one *prasṛta* (two *palas*) each of *bilva, yava, kola, kulattha, dhānyaka* and *madana-phala,* and two *āḍhakas* each of milk and water should be added and boiled till the milk i.e. two *āḍhakas* of the liquid remains. The milk should then be filtered out through a white cloth. To this milk, the paste of *vacā, śatāhvā, deva-dāru, kuṣṭha, yaṣṭi-madhu, siddhārthaka, pippalī, yavānī* and *madana-phala* should be added. When luke warm, jaggery, rock-salt, one *prasṛta* each of honey, oil and ghee should be added to this recipe, and administered as *nirūha-basti*

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appropriately by a physician well-versed in this field. It cures all the diseases caused by *saṃsarga* (combination of aggravated *doṣas*). [65 - 68]

This recipe is useful for diseases caused by the combined form of aggravated *vāyu, pitta* and *kapha.*

Number of Bastis for Different Doṣas

स्निग्धोष्ण एकः पवने समांसो द्वौ स्वादुशीतौ पयसा च पित्ते।
त्रयः समूत्राः कटुकोष्णतीक्ष्णाः कफे निरूहा न परं विधेयाः।। ६९।।

Patients suffering from *vātika* diseases should be given one *nirūha-basti* which is unctuous and warm, and which contains meat-soup. For the patients suffering from *paittika* diseases, two *nirūha-bastis* which are sweet and cold, and which contain milk should be given. Patients suffering from *kaphaja* diseases should be given three *nirūha-bastis* which contain cow's urine and which are pungent, hot as well as sharp.

Nirūha-basti should not be given in excess of these specified numbers. [69]

In *Suśruta* : *Cikitsā* 32 : 6, even four *nirūha-bastis* are described to be given. Such additional enemas beyond the limited number (of three) described above are exceedingly harmful, and therefore, not desirable.

Regimen After Nirūha-basti

रसेन वाते प्रतिभोजनं स्यात् क्षीरेण पित्ते तु कफे च यूषैः।
तथाऽनुवास्येषु च बिल्वतैलं स्याज्जीवनीयं फलसाधितं च।। ७०।।

After the administration of *nirūha-basti*, the patient suffering from *vātika* diseases should be given meat-soup; the patient suffering from *paittika* diseases should be given milk; and the patient suffering from *kaphaja* diseases should be given vegetable-soup as diet.

After the administration of *nirūha-basti* (evacuative type of medicated enema), those requiring *anuvāsana-basti* (unctuous type of medicated enema) should be given this

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enema containing *Bilva-taila* (if the disease is caused by *vāyu*), *Jīvanīya-taila* (if the disease is caused by *pitta*) or *Madhu-phala-taila* (if the disease is caused by *kapha*).[70]

The recipe of *Bilva-taila* is described in *Siddhi* 4 : 4-7, of *Jīvanīya-taila* in *Siddhi* 4 : 9-12, and of *Madana-phala taila* is described in *Siddhi* 4 : 17.

Epilogue

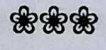
इतीदमुक्तं निखिलं यथावद्बस्तिप्रदानस्य विधानमग्र्यम्।
योऽधीत्य विद्वानिह बस्तिकर्म करोति लोके लभते स सिद्धिम्।। ७१।।

Thus, the foremost methods of the administration of *basti* is fully described. The wise physician, who, after studying this, practises *basti* (medicated enema) therapy achieves success in this world. [71]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते
दृढबलसंपूरिते सिद्धिस्थाने बस्तिसूत्रीय-
सिद्धिर्नाम तृतीयोऽध्यायः।। ३।।

Thus, ends the third chapter describing "the Principles of *Basti*" in the text composed by Agniveśa, redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.



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CHAPTER - IV

चतुर्थोऽध्यायः

(COMPLICATIONS OF UNCTUOUS ENEMA AND THEIR SUCCESSFUL MANAGEMENT)

Prologue

अथातः स्नेहव्यापत्सिद्धिं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

We shall now expound the chapter dealing with "the Management of Complications Arising from the Administration of *Anuvāsana-basti* (Unctuous Enema)".

Thus, said Lord Ātreya. [1-2]

In the previous chapter (verse no. 70) *Bilva-taila,* etc., are described to be used for unctuous enema. These recipes, and the management of the complications arising from their administration are described in the present chapter.

Details of Topics to be Discussed

स्नेहबस्तीन्निबोधेमान् वातपित्तकफापहान्।
मिथ्याप्रणिहितानां च व्यापदः सचिकित्सिताः।।३।।

Now listen ! [addressed to Agniveśa by the preceptor Ātreya] to the description of the following topics :

(1) Recipes for *sneha* or *anuvāsana-basti* (unctuous enema) for the treatment of diseases caused by *vāyu, pitta* and *kapha*;

(2) Complications arising from their wrongful administration; and

(3) Treatment of these complications. [3]

In this chapter, different topics relating to *sneha* or *anuvāsana* as indicated in the above text are discussed in detail. In the prologue, there is no mention of the other topic which is described in this chapter (vide verse no. 50-51) because of its brevity.

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Anuvāsana Recipe for Vāyu (Bilva-taila)

दशमूलं बलां रास्नामश्वगन्धां पुनर्नवाम्।
गुडूच्येरण्डभूतीकभार्गीवृषकरोहिषम् ।।४।।
शतावरीं सहचरं काकनासां पलांशिकम्।
यवमाषातसीकोलकुलत्थान् प्रसृतोन्मितान्।।५।।
चतुर्द्रोणेऽम्भसः पक्त्वा द्रोणशेषेण तेन च।
तैलाढकं समक्षीरं जीवनीयैः पलोन्मितैः।।६।।
अनुवासनमेतद्धि सर्ववातविकारनुत्।

One *pala* of each of *bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārikā, gokṣura, balā, rāsnā, aśvagandhā, punarnavā, guḍūcī, eraṇḍa, bhūtīka* (*yavānī*), *bhārgī, vṛṣaka* (*vāsā*), *rohiṣa, śatāvarī, sahacara* as well as *kākanāsā* (*vāyasī-phala*), and one *prasṛta* (two *palas*) of each of *yava, māṣa, atasī, kola* as well as *kulattha* should be added with four *droṇas* (one *droṇa* = 256 *palas*) of water, and cooked till one *droṇa* of the liquid remains. To this decoction, one *āḍhaka* (64 *palas*) of each of oil and milk, and the paste of one *pala* of each of *jīvaka, ṛṣbhaka, medā, mahā-medā, kākolī, kṣīra-kākolī, mudga-parṇī, māṣa-parṇī, jīvantī* and *madhuka* should be added. *Anuvāsana-basti* (unctuous enema) with this recipe cures all the diseases caused by *vāyu*. [4 - $^{1}/_{2}$ 7]

In the place of *kākanāsā*, some physicians use *vāsā-phala* (*kāyuyāṭuṭī*). One of the ingredients of *daśa-mūla* (a group name of ten drugs whose roots are used in medicine) is *bilva* because of which the recipe is called *Bilva-taila*.

Other Anuvāsana Recipes for Vāyu

आनूपानां वसा तद्वज्जीवनीयोपसाधिता।।७।।
शताह्वायवबिल्वाम्लैः सिद्धं तैलं समीरणे।
सैन्धवेनाग्नितप्तेन तप्तं चानिलनुद्घृतम्।।८।।

Anuvāsana-basti prepared of *vasā* (muscle fat) of animals inhabiting marshy land, boiled with drugs belonging to *Jīvanīya* group (*jīvaka, ṛṣabhaka, medā, mahā-medā, kākolī,*

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kṣīra-kākolī, mudga-parṇī, māṣa-parṇī, jīvantī and *madhuka*), similarly cures *vātika* diseases.

Anuvāsana-basti with the oil cooked by *śatāhvā, yava, bilva* and sour juice is also useful in *vātika* diseases.

Anuvāsana-basti with ghee heated by the immersion of hot rock-salt cures diseases caused by *vāyu.* [7 $^{1}/_{2}$ - 8]

These are the three additional recipes of *anuvāsana-basti* which cure *vātiṣka* diseases.

Recipe of Anuvāsana-basti for Pitta (Jīvanīya-yamaka)

जीवन्तीं मदनं मेदां श्रावणीं मधुकं बलाम्।
शताह्वर्षभकौ कृष्णां काकनासां शतावरीम्।। ९।।
स्वगुप्तां क्षीरकाकोलीं कर्कटाख्यां शटीं वचाम्।
पिष्ट्वा तैलं घृतं क्षीरे साधयेत्तच्चतुर्गुणे।। १०।।
बृंहणं वातपित्तघ्नं बलशुक्राग्निवर्धनम्।
मूत्ररेतोरजोदोषान् हरेत्तदनुवासनम्।। ११।।

Ghee and oil taken together may be cooked by adding four times of milk along with the paste of *jīvantī, madana-phala, medā, śrāvaṇī, madhuka, balā, śatāhvā, ṛṣabhaka, kṛṣṇā* (*pippalī*), *kākanāsā, śatāvarī, svaguptā* (*ātma-guptā*), *kṣīra-kākolī, karkaṭākhyā* (*karkaṭa-śṛṅgī*), *śaṭī* and *vacā*. *Anuvāsana-basti* with this recipe is nourishing, alleviator of *vāyu* and *pitta*, promoter of strength, semen and *agni* (power of digestion including metabolism) and curative of urinary, seminal and menstrual morbidities. [9 - 11]

Another Auvāsana Recipe for Pitta

लाभतश्चन्दनाद्यैश्च पिष्टैः क्षीरचतुर्गुणम्।
तैलपादं घृतं सिद्धं पित्तघ्नमनुवासनम्।। १२।।

Ghee cooked with four times of milk, one fourth in quantity of oil, and the paste of drugs belonging to *Candanādi*-group whichever are available, should be used for *anuvāsana-basti* which alleviates *pitta.* [12]

Drugs belonging to *Candanādi*-group are described in the chapter dealing with the treatment of fever (vide *Cikitsā* 3 : 258).

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Anuvāsana Recipe for Kapha

सैन्धवं मदनं कुष्ठं शताह्वां निचुलं वचाम्।
ह्रीवेरं मधुकं भार्गीं देवदारु सकट्फलम्।।१३।।
नागरं पुष्करं मेदां चविकां चित्रकं शटीम्।
विडङ्गातिविषे श्यामां हरेणुं नीलिनीं स्थिराम्।।१४।।
बिल्वाजमोदे कृष्णां च दन्तीं रास्नां च पेषयेत्।
साध्यमेरण्डजं तैलं तैलं वा कफरोगनुत्।।१५।।
ब्रध्नोदावर्तगुल्मार्शःप्लीहमेहाढ्यमारुतान् ।
आनाहमश्मरीं चैव हन्यात्तदनुवासनात्।।१६।।

Castor oil or sesame oil should be cooked by adding the paste of *saindhava* (rock-salt), *madana, kuṣṭha, śatāhvā, nicula, vacā, hrīvera, madhuka, bhārgī, devadāru, kaṭphala, nāgara, puṣkara, medā, cavikā, citraka, śaṭī, viḍaṅga, ativiṣā, śyāmā, hareṇu, nīlinī, sthirā, bilva, ajamodā, kṛṣṇā, dantī* and *rāsnā*. *Anuvāsana-basti* with this medicated oil cures *kaphaja* diseases, *bradhna* (inguinal enlargement), *udāvarta* (upward movement of wind in the abdomen), *gulma* (phantom tumour), *arśas* (piles), *plīhan* (splenic disorders), *meha* (obstinate urinary diseases including diabetes), *āḍhya-vāta* (a joint disease), *ānāha* (tympanites) and *aśmarī* (calculus). [13-16]

Another Anvāsana Recipe for Kapha (Madana-taila)

मदनैर्वाऽम्लसंयुक्तैर्बिल्वाद्येन गणेन वा।
तैलं कफहरैर्वाऽपि कफघ्नं कल्पयेद् भिषक्।।१७।।

Oil cooked with *madana-phala* by adding sour liquid (vinegar etc.,) or by adding (the decoction as well as paste of) *bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*, or by adding *kapha*-alleviating drugs may be used for *anuvāsana-basti* for the alleviation of *kapha*. [17]

Drugs mentioned by group name of *gaṇa* to be used in a recipe (of medicated oil), are to be added in the forms of both paste and decoction.

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Kapha-alleviating drugs are already described in the previous chapter (vide *Siddhi* 3 : 56-64). These drugs are to be used in the preparation of the recipe described above (last). Alternatively, *trikaṭu* (*śuṇṭhī, pippalī* and *marica*) or *pañca-kola* (*pippalī, pippalī-mūla, cavya, citraka* and *nāgara*) can be used in this recipe.

Recipe for Anuvāsana-basti

विडङ्गैरण्डरजनीपटोलत्रिफलामृताः ।
जातीप्रवालनिर्गुण्डीदशमूलाखुपर्णिकाः ।।१८।।
निम्बपाठासहचरशम्पाककरवीरकाः ।
एषां क्वाथेन विपचेत्तैलमेभिश्च कल्कितैः।।१९।।
फलबिल्वत्रिवृत्कृष्णारास्नाभूनिम्बदारुभिः ।
सप्तवर्णवचोशीरदार्वीकुष्ठकलिङ्गकैः ।।२०।।
लतागौरीशताह्वाग्निशटीचोरकपौष्करैः ।
तत् कुष्ठानि क्रिमीन् मेहानर्शांसि ग्रहणीगदम्।।२१।।
क्लीबतां विषमाग्नित्वं मलं दोषत्रयं तथा।
प्रयुक्तं प्रणुदत्याशु पानाभ्यङ्गानुवासनैः।।२२।।

Oil should be cooked by adding the decoction of *viḍaṅga, eraṇḍa, rajanī, paṭola, harītakī, bibhītaka, āmalakī, amṛtā,* tender leaves of *jātī, nirguṇḍī, bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī, gokṣura, ākhu-parṇī, nimba, pāṭhā, sahacara, śampāka,* and *karavīra,* and the paste of *madana-phala, bilva, trivṛt, kṛṣṇā, rāsnā, bhū-nimba, deva-dāru, sapta-parṇa, vacā, uśīra, dārvī, kuṣṭha, kaliṅga, latā* (*mañjiṣṭhā*), *gaurī* (*haridrā*), *śatāhvā, agni, śaṭī, coraka* and *puṣkara-mūla.* Administration of this medicated oil as potion, for massage or for *anuvāsana-basti* immediately cures *kuṣṭha* (obstinate skin diseases including leprosy), *krimi* (parasitic infestation), *meha* (obstinate urinary disorders including diabetes), *arśas* (piles), *grahaṇī* (sprue), *klībatā* (impotency), *viṣamāgni* (irregular digestion), *mala* (production of morbid matter in excess) and diseases caused by all the three *doṣas* (viz., *vāyu, pitta* and *kapha*).

[18 - 22]

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Effects of Anuvāsana-basti in General

व्याधिव्यायामकर्माध्वक्षीणाबलनिरोजसाम् ।
क्षीणशुक्रस्य चातीव स्नेहबस्तिर्बलप्रदः।। २३।।
पादजङ्घोरुपृष्ठांसकटीनां स्थिरतां पराम्।
जनयेदप्रजानां च प्रजां स्त्रीणां तथा नृणाम्।। २४।।

Sneha or *anuvāsana-basti* (unctuous enema) [administered with the above mentioned medicated oils] promotes excessive strength of persons who are emaciated and debilitated because of long suffering from diseases, excessive exercise, hard labour, walking long distance, loss of *ojas* (vital essence) and diminution of semen. It causes excellent stability of feet, calves, thighs, back, shoulder and lumbar region. It helps in the procreation of offsprings by the sterile men and women. [23-24.]

Conditions Leading to Complications

वातपित्तकफात्यन्नपुरीषैरावृतस्य च।
अभुक्ते च प्रणीतस्य स्नेहबस्तेः षडापदः।। २५।।

[Improper administration of] *anuvāsana-basti* may give rise to complications in the following six conditions :

(1) Occlusion of the enema-fluid by *vāyu*;

(2) Occlusion of the enema-fluid by *pitta*;

(3) Occlusion of the enema-fluid by *kapha*;

(4) Occlusion of the enema-fluid by food, taken in excess;

(5) Occlusion of the enema-fluid by feces; and

(6) Administration of enema in empty stomach. [25]

Complications arising out of the administration of *anuvāsna-basti* in the above mentioned six conditions constitute *mithyā-yoga* (improper administration) of this type of medicated enema. These are described here with reference to the statement in verse no. 3 of this chapter. This does not include the complications arising out of less or excessive administration (*ayoga* or *ati-yoga*) of *anuvāsana* which are already

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described in *Siddhi* 1 : 45-46. For the treatment of ailments caused by less administration of *anuvāsana,* the same *basti* should be repeated. For the ailments caused by excess administration of *anuvāsana, nirūha* (*śodhana*) type of *basti* should be given. [In this connection, Cakrapāṇi is making a reference to the statement in verse no. 51, the implications of which are not very clear.]

Factors Responsible for Occlusion of Enema-fluid

शीतोऽल्पो वाऽधिके वाते पित्तेऽत्युष्णः कफे मृदुः।
अतिभुक्ते गुरुर्वर्चःसंचयेऽल्पबलस्तथा।। २६।।
दत्तस्तैरावृतः स्नेहो न यात्यभिभवादपि।
अभुक्तेऽनावृतत्वाच्च यात्यूर्ध्वं तस्य लक्षणम्।। २७।।

The *sneha* (unctuous fluid of *anuvāsana-basti*) being occluded does not reach its destination because of the following :

(1) If cold recipe is used in small quantity for unctuous enema when *vāyu* is aggravated;

(2) If excessively hot recipe is used for unctuous enema when *pitta* is aggravated;

(3) If mild recipe is used for unctuous enema when *kapha* is aggravated;

(4) If heavy recipe is used for unctuous enema when the patient has consumed food in excess quantity;

(5) If a recipe of mild nature (*alpa-bala*) is used for unctuous enema when there is accumulation of stool; and

(6) If the recipe is afflicted (*abhibhavāt*) [because of excessively aggravated *doṣas*].

If the patient has not taken food before the administration of unctuous enema, then the enema-recipe reaches upwards (much above the desired level) because of the absence of any obstruction.

Hereafter, the signs of different impediments will be described. [26-27]

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Signs of Impediments by Vāyu

अङ्गमर्दज्वराध्मानशीतस्तम्भोरुपीडनैः ।
पार्श्वरुग्वेष्टनैर्विद्यात् स्नेहं वातावृतं भिषक्।। २८।।

The physician should ascertain the obstruction of the unctuous fluid by *vāyu* from the signs and symptoms like malaise, fever, *ādhmāna* (flatulence), *śīta* (feeling of cold), *stambha* (stiffness), *ūru-pīḍana* (pain in the thighs), *pārśva-ruk* (pain in the sides of the chest) and *pārśva-veṣṭana* (cramps in the sides of the chest). [28]

Treatment of Vāyu Impediment

स्निग्धाम्ललवणोष्णैस्तं रास्नापीतद्रुतैलिकैः।
सौवीरकसुराकोलकुलत्थयवसाधितैः ।। २९।।
निरूहैर्निहरेत् सम्यक् समूत्रैः पाञ्चमूलिकैः।
ताभ्यामेव च तैलाभ्यां सायं भुक्तेऽनुवासयेत्।। ३०।।

The occlusion [of the enema-fluid by *vāyu*] should be removed by the administration of *nirūha-basti* with the recipes of *Rāsnādi-taila* and *Pītadru-taila* having the characteristic features as follows :

(1) Which are added with unctuous, sour, saline and hot ingredients;

(2) Which are prepared by adding *sauvīraka* (vinegar), *surā* (alcohol), *kola*, *kulattha* and *yava*; and

(3) Which are mixed with cow's urine, and the decoction of *bilva*, *śyonāka, gambhārī, pāṭalā* and *gaṇikārikā*.

After the evening meals, the patient should be given *anuvāsana-basti* with the above mentioned *Rāsnā-taila* and *Pītadru-taila*. [29-30]

Rāsnā-taila is described in *Cikitsā* 28 : 165-166.

Signs and Treatment of Pitta Impediments

दाहरागतृषामोहतमकज्वरदूषणैः ।
विद्यात् पित्तावृतं स्वादुतिक्तैस्तं बस्तिभिर्हरेत्।। ३१।।

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The occlusion [of the unctuous enema-fluid] by *pitta* can be ascertained from the affliction of the patient by burning sensation, redness, morbid thirst, unconsciousness, *tamaka* (entering into darkness) and fever.

This occlusion can be removed by the administration of enema containing sweet and bitter ingredients. [31]

Signs of Kapha Impediments

तन्द्राशीतज्वरालस्यप्रसेकारुचिगौरवैः ।
संमूर्च्छाग्लानिभिर्विद्याच्छ्लेष्मणा स्नेहमावृतम्।। ३२।।

The occlusion of the unctuous enema-fluid by *kapha* can be ascertained from the affliction of the patient by drowsiness, cold, fever, indolence, salivation, anorexia, heaviness, fainting and depression (*glāni*). [32]

Treatment of Kapha Impediments

कषायकटुतीक्ष्णोष्णैः सुरामूत्रोपसाधितैः।
फलतैलयुतैः साम्लैर्बस्तिभिस्तं विनिर्हरेत्।। ३३।।

The occlusion (of the unctuous fluid by *kapha*) can be removed by the administration of *basti* prepared by alcohol and cow's urine by adding *Madana-phala-taila,* as well as astringent, pungent, sharp, hot and sour ingredients. [33]

Madana-phala taila is already described in verse no. 17 of this chpater.

Signs of Impediments by Intake of Food in Excess

छर्दिमूर्च्छारुचिग्लानिशूलनिद्राङ्गमर्दनैः ।
आमलिङ्गैः सदाहैस्तं विद्यादत्यशनावृतम्।। ३४।।

The occlusion (of the unctuous fluid) by the intake of food in excess can be ascertained from the afflictions of the patient by vomiting, fainting, anorexia, depression, colic pain, excessive sleep, malaise, signs of *āma* (caused by the product of improper digestion and metabolism) and burning sensation. [34]

Signs of *āma* includes indolence, etc.

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Treatment of Impediments Caused by Intake of Food in Excess

कटूनां लवणानां च क्वाथैश्चूर्णैश्च पाचनम्।
विरेको मृदुरत्रामविहिता च क्रिया हिता।। ३५।।

For this type of occlusion (of unctuous fluid by the intake of food in excess), *pācana* (metabolic transformation of the undigested products) with pungent and saline decoctions as well as powders, mild purgation and therapies prescribed for correcting *āma* (product of improper digestion and metabolism) are useful. [35]

Therapeutic measures for correcting *āma* are described in *Vimāna* 2 : 13. [The exact reference quoted by Cakrapāṇi is not available in the extant edition; it is only in a slightly modified form.]

Signs and Treatment of Impediments by Stool

विण्मूत्रानिलसङ्गार्तिगुरुत्वाध्मानहृद्ग्रहैः ।
स्नेहं विडावृतं ज्ञात्वा स्नेहस्वेदैः सवार्तिभिः।। ३६।।
श्यामाबिल्वादिसिद्धैश्च निरूहैः सानुवासनैः।
निहरेद्विधिना सम्यगुदावर्तहरेण च।। ३७।।

The occlusion (of the unctuous enema-fluid) by stool can be ascertained from the afflictions of the patient by the obstruction to the passage of stool, urine and flatus, pain, heaviness, flatulence and cardiac spasm.

Such a patient should be treated by oleation, fomentation and *phala-varti* (medicated suppository) therapies. With *śyāmā, bilva,* etc., *nirūha-basti* followed by *anuvāsana-basti* should be given appropriately for the removal of obstruction. The patient should be given therapies on the line suggested for the treatment of *udāvarta* (an ailment characterized by upward movement of wind). [36-37]

In the place of '*varti*' there is a variant reading as '*basti*'. *Bilva,* etc., along with *śyāmā* are suggested above for the treatment. *Bilva,* etc., refers to *daśa-mūla* which is a collective name for *bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī bṛhatī, kaṇṭakārī*

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and *gokṣura*. The term '*śyāmābilvādi...*' in the verse no. 37 can be interpreted in two different ways, viz., '*śyāmā* and *bilvādi*' or "*śyāmādi* and *bilvādi*". The former is already explained before. If the latter interpretation is accepted, then *śyāmādi* stands for the nine drugs, viz., *śyāmā, trivṛt, caturaṅgula, tilvaka, mahā-vṛkṣa, saptalā, saṅkhinī, dantī* and *dravantī* (vide *Kalpa* 1 : 6).

The line of treatment of *udāvarta* referred to in the above text is described in *Cikitsā* 26 : 11-31.

Ailments Caused by Administration of Basti on Empty Stomach, and Their Treatment

अभुक्ते शून्यपायौ वा वेगात् स्नेहोऽतिपीडितः।
धावत्यूर्ध्वं ततः कण्ठादूर्ध्वेभ्यः खेभ्य एत्यपि।। ३८।।
मूत्रश्यामात्रिवृत्सिद्धो यवकोलकुलत्थवान्।
तत्सिद्धतैल इष्टोऽत्र निरूहः सानुवासनः।। ३९।।
कण्ठादागच्छतः स्तम्भकण्ठग्रहविरेचनैः।
छर्दिघ्नीभिः क्रियाभिश्च तस्य कार्यं निवर्तनम्।। ४०।।

If the *anuvāsana-basti* is given on empty stomach or on emptied bowel or if the enema-fluid is injected with great force, then it goes up speedily, and comes out from the throat or through the orifices in the upper part of the body.

In this condition, oil cooked with cow's urine, *śyāmā-trivṛt, yava, kola* and *kulattha* should be used for giving *nirūha* and *anuvāsana* types of medicated enema.

If the enema-fluid starts coming out of the throat, then the patient should be given *stambhana* therapies (like fanning and sprinkling with cold water); pressure should be applied over his throat [to prevent further upward movement of the enema-fluid], and he should be given purgative and anti-emetic therapies. [38-40]

In the verse no. 25, only one factor, viz., administration of *anuvāsana-basti* in empty stomach is described as the cause of the movement of the recipe upwards, and the signs as well as treatment of this were to be described here. But, in the above text, two additional factors, viz., emptied bowel and forceful injection (of the enema-fluid)

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are described to cause such upward movements. Since all these three factors produce the same effect, and since the same treatment is required to be given, these additional two factors are also mentioned in the above text.

Anti-emetic therapies as described in *Cikitsā* 20 : 41-44 are to be used in the treatment of the present ailment.

Non-elimination of Enema-fluid

यस्य नोपद्रवं कुर्यात् स्नेहबस्तिरनिःसृतः।
सर्वोऽल्पो वाऽऽवृतो रौक्ष्यादुपेक्ष्यः स विजानता।। ४१।।

If, because of ununctuousness, the unctuous enema-fluid, being obstructed, does not get eliminated totally or partially, but the condition is not attended with complications, then an expert physician should leave the patient alone (i.e. he should not try to bring out the fluid by therapies). [41]

If the body of the patient is exceedingly ununctuous, then even the retention of the unctuous fluid in it does not cause any complication. The expert physician, in such a case should not employ therapies as prescribed for *vātāvṛta-sneha* earlier in the verse nos. 29-30. Similar view is also expressed in other works (vide *Suśruta* : *Cikitsā* 37 : 97).

Diet After Anuvāsana-basti

युक्तस्नेहं द्रवोष्णं च लघुपथ्योपसेवनम्।
भुक्तवान् मात्रया भोज्यमनुवास्यस्त्र्यहात्त्र्यहात्।। ४२।।

After appropriate administration of *anuvāsana-basti*, the patient should be given liquid, hot, light and wholesome food. After the intake of this food in appropriate quantity, the patient may repeatedly be given *anuvāsana-basti* every third day. [42]

The statement above regarding the repeat of the *anuvāsana-basti* every third day is a general one.

Hot Water

धान्यनागरसिद्धं हि तोयं दद्याद्विचक्षणः।
व्युषिताय निशां कल्यमुष्णं वा केवलं जलम्।। ४३।।
स्नेहाजीर्णं जरयति श्लेष्माणं तद् भिनत्ति च।
मारुतस्यानुलोम्यं च कुर्यादुष्णोदकं नृणाम्।। ४४।।

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वमने च विरेके च निरूहे सानुवासने।
तस्मादुष्णोदकं देयं वातश्लेष्मोपशान्तये।। ४५।।

In the next morning, after the night, the expert physician should give water boiled with *dhānyaka* and *nāgara* (*śuṇṭhī*), or simple warm water.

This warm water helps the patient in the digestion of undigested fat and it disintegrates *kapha*. Therefore, after emesis, purgation, *nirūha* and *anuvāsana* therapies, warm water is to be given to the patient for the alleviation of *vāyu* and *kapha*. [43 - 45]

The undigested portion of *sneha* (fat) remains adhered to the wall of the colon which gets digested by the intake of warm water.

Frequency of Anuvāsana-basti

रूक्षनित्यस्तु दीप्ताग्निर्व्यायामी मारुतामयी।
वङ्क्षणश्रोण्युदावृत्तवाताश्चार्हा दिने दिने।। ४६।।
एषां चाशु जरां स्नेहो यात्यम्बु सिकतास्विव।
अतोऽन्येषां त्र्यहात् प्रायः स्नेहं पचति पावकः।। ४७।।

Persons who are habituated to taking ununctuous food, who have strong *agni* (power of digestion and metabolism), who perform physical exercise, who are afflicted with *vātika* diseases, whose pelvic region and hip region are afflicted with *vāta*, and who are suffering from *udāvarta* (upward movement of *vāyu*) should be given *anuvāsana-basti* every day. As the water falling over sand gets absorbed immediately, similarly the fat given to these patients gets immediately digested.

In the case of others, the *agni* (digestive enzymes) generally digests *sneha* (fat) in three days. [46 - 47]

The above mentioned frequency of giving *anuvāsana-basti* for different categories of persons is also described in other works (vide *Suśruta* : *Cikitsā* 37 : 79).

In ordinary cases, the fat adhered to the wall of the colon gets digested in three days by the *agni* located in the colon which gets exudated to the exterior.

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Agni (digestive enzymes) is located above the colon; hence the fat adhered to the wall of the colon does not come in direct contact with *agni*. Even then parts of *jāṭharāgni* which get mixed up with fat perform this work of digestion.

Use of the term '*prāyaḥ*' meaning 'generally' implies the digestion of fat even on the fifth day. Keeping this in view, *anuvāsana-basti* is also suggested to be given on the fifth day (vide *Siddhi* 1 : 24).

Prohibition of Uncooked Fat

न त्वामं प्रणयेत् स्नेहं स ह्यभिष्यन्दयेद् गुदम्।
सावशेषं च कुर्वीत वायुः शेषे हि तिष्ठति।। ४८।।

Uncooked fat should not be used for *anuvāsana-basti* as it produces stuffiness (*abhiṣyanda*) in the rectum.

Some portion of the fat (enema-fluid) should be allowed to remain in *basti* (bladder which is used as receptacle of enema-fluid) because it contains air. [48]

Prohibition of Fat after Anuvāsana

न चैव गुदकण्ठाभ्यां दद्यात् स्नेहमनन्तरम्।
उभयस्मात् समं गच्छन् वातमग्निं च दूषयेत्।। ४९।।

After the administration of *anuvāsana-basti*, fat should not be given through the anus or mouth, because the fat coming out from both the sides (upper and lower) simultaneously vitiates *vāyu* and *agni* (enzymes responsible for digestion). [49]

Vitiation of *vāyu* described above is caused by indigestion and its occlusion.

Prohibition of Exclusive Administration of Nirūha and Anuvāsana

स्नेहबस्तिं निरूहं वा नैकमेवातिशीलयेत्।
उत्क्लेशाग्निवधौ स्नेहान्निरूहात् पवनाद् भयम्।। ५०।।
तस्मान्निरूढः संस्नेह्यो निरूह्यश्चानुवासितः।
स्नेहशोधनयुक्त्यैवं बस्तिकर्म त्रिदोषनुत्।। ५१।।

Either *nirūha* or *anuvāsana* should not be taken in excess

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(without interruption by the other). Excessive administration of *anuvāsana* [exclusively] gives rise to *utkleśa* (excitement of *kapha* and *pitta*) and suppression of the power of digestion. Excessive administration of *nirūha* [exclusively] leads to the risk of *vāyu* getting aggravated.

Therefore, after *nirūha-basti,* the patient should be given *anuvāsana-basti*, and after *anuvāsana-basti, nirūha-basti* should be given. Thus, by giving *anuvāsana* and *nirūha* appropriately (one after the other), this *basti* therapy cures the diseases caused by all the three *doṣas.* [50 - 51]

Anuvāsana-basti cures *vātika* diseases, and *nirūha-basti* cures diseases caused by *kapha* as well as *pitta*. Therefore, if appropriately administered one after the other, these two types of *basti* therapies cure diseases caused by all the three *doṣas*.

Mātrā-basti

कर्मव्यायामभाराध्वया(पा)नस्त्रीकर्षितेषु च।
दुर्बले वातभग्ने च मात्राबस्तिः सदा मतः।।५२।।
यथेष्टाहारचेष्टस्य सर्वकालं निरत्ययः।
ह्रस्वायाः स्नेहमात्राया मात्राबस्तिः समो भवेत्।।५३।।
बल्यं सुखोपचर्यं च सुखं सृष्टपुरीषकृत्।
स्नेहमात्राविधानं हि बृंहणं वातरोगनुत्।।५४।।

Mātrā-basti is always useful for persons emaciated by *karma* (playing with ball, etc.), *vyāyāma* (practicing archery, etc.), carrying heavy load, long way-faring, riding vehicles or indulging in sexual intercourse with women, and for persons who are weak and who are afflicted with *vātika* diseases (get broken by *vāyu*).

While taking *mātrā-basti,* a person can take any food, and may do any work as he likes. It can be safely administered in all the seasons.

The dose of *mātrā-basti* is equal to the minimum quantity in which *anuvāsana-basti* is prescribed to be administered.

This *mātrā-basti* which is a form of *anuvāsana-basti*

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promotes strength, and can be administered easily. It helps in easy voiding (elimination) of stool. It causes nourishment, and cures diseases caused by aggravated *vāyu*. [52 - 54]

For *mātrā-basti*, the dose of fat to be given is equal to the minimum quantity prescribed for *anuvāsana-basti*. This dose gets digested in half a day (vide *Sūtra* 13 : 29). According to another work, six *palas* of fat is the maximum dose, three *palas* of fat is the medium dose, and one and half a *pala* of fat is the minimum dose for *anuvāsana-basti*. *Suśruta* has also stated accordingly (vide *Suśruta* : *Cikitsā* 35 : 18). Thus, the dose of *mātrā-basti* is one and half a *pala*.

Mātrā-basti can be administered easily because it does not call for any restriction in food and activities.

Epilogue

तत्र श्लोकौ–

वातादीनां शमायोक्ताः प्रवराः स्नेहबस्तयः।
तेषां चाज्ञप्रयुक्तानां व्यापदः सचिकित्सिताः।। ५५।।
प्राग्भोज्यं स्नेहबस्तेर्यद् ध्रुवं येऽर्हास्त्र्यहाच्च ये।
स्नेहबस्तिविधिश्चोक्तो मात्राबस्तिविधिस्तथा।। ५६।।

To sum up :

In this chapter, the topics described are as follows :

(1) Foremost recipes of *anuvāsana-basti* for the alleviation (elimination) of aggravated *vāyu*, etc.; (vide verse nos. 4-24)

(2) Complications arising out of their administration by ignorant persons, and treatment of these complications; (vide verse nos. 25-41)

(3) Diet to be given before the administration of *anuvāsana-basti*; (vide verse nos. 42-45)

(4) Persons for whom *anuvāsana-basti* is indicated to be taken every day and for whom it is indicated on every third day; (vide verse nos. 46-47)

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(5) The method of administering *anuvāsana-basti*; and (vide verse nos. 48-51)

(6) The method of administering *mātrā-basti*. (vide verse nos. 52-54) [55 - 56]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते
दृढबलसंपूरिते सिद्धिस्थाने स्नेहव्याप-
त्सिद्धिर्नाम चतुर्थोऽध्यायः ।। ४ ।।

Thus, ends the fourth chapter in *Siddhi-sthāna* dealing with "the Successful Treatment of Complications Arising Out of *Anuvāsana-basti*" of Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - V

पञ्चमोऽध्यायः

(COMPLICATIONS OF DEFECTIVE NOZZLE, ETC., AND THEIR TREATMENT)

Prologue

अथातो नेत्रबस्तिव्यापत्सिद्धिं व्याख्यास्यामः।। १।।
इति ह स्माह भगवानात्रेयः।। २।।

We shall now expound the chapter on "Complications Arising out of the Use of Defective Nozzle, and its Receptacle (including the Technique of Administration), and their Successful Treatment".

Thus, said Lord Ātreya. [1-2]

Topics to be Discussed

अथ नेत्राणि बस्तींश्च शृणु वर्ज्यानि कर्मसु।
नेत्रस्याज्ञप्रणीतस्य व्यापदः सचिकित्सिताः।। ३।।

Now, listen to the description of the following topics :

(1) Types of nozzles (*netras*) and their receptacles (*bastis*) which are not to be used for the administration of enema;

(2) Complications arising out of their use;

(3) Complications arising out of the mishandling of the nozzles (including enema receptacle) by an inexperienced physician; and

(4) Treatment of these complications. [3]

In the previous chapter (no. IV), different conditions in which administration of enema gives rise to complications, and their management are described. Because of contextual propriety the complications arising out of the use of inappropriate appliances (nozzles

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and their receptacles), and wrong technique for enema are described in this chapter.

Inappropriate Nozzles and Complications Arising Out of Their Use

ह्रस्वं दीर्घं तनु स्थूलं जीर्णं शिथिलबन्धनम्।
पार्श्वच्छिद्रं तथा वक्रमष्टौ नेत्राणि वर्जयेत्।। ४।।
अप्राप्त्यतिगतिक्षोभकर्षणक्षणनस्रवाः ।
गुदपीडा गतिर्जिह्मा तेषां दोषा यथाक्रमम्।। ५।।

The eight types of nozzles (*netras*) which are not to be used for the administration of enema, and complications arising out of their use are as follows :

Characteristics of Nozzles	Complications Arising Out of Their Use
(1) *Hrasva* (smaller in size)	*Aprāpti* (enema-fluid not reaching its destination)
(2) *Dīrgha* (longer in size)	*Atigati* (enema-fluid penetrating far above)
(3) *Tanu* (thinner in shape)	*Kṣobha* (irritation caused by the unstability of the nozzle in the rectum)
(4) *Sthūla* (thicker in shape)	*Karṣaṇa* (bruising the wall of the rectum)
(5) *Jīrṇa* (worn out)	*Kṣaṇana* (causing injury to the rectum)
(6) *Śithila-bandhana* (loose fixation)	*Srava* (leaking out of the enema-fluid)
(7) *Pārśva-chidra* (having holes in the side)	*Guda-pīḍā* (causing pain in the rectum)
(8) *Vakra* (curved)	*Jihma-gati* (tortuous passage of the fluid) [4-5]

Since the eight items are described in the above text, specifying their number again as eight (*aṣṭa*) implies that all the other defects of

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nozzle are also included in these eight items. Similarly, the specification of number in the subsequent verses is to be interpreted accordingly.

Inappropriate Bastis and Complications Arising Out of Their Use

विषममांसलच्छिन्नस्थूलजालिकवातलाः ।
स्निग्धः क्लिन्नश्च तानष्टौ बस्तीन् कर्मसु वर्जयेत् ।। ६ ।।
गतिवैषम्यविस्रत्वस्रावदौर्ग्राह्यनिस्रवाः ।
फेनिलच्युत्यधार्यत्वं बस्तेः स्युर्बस्तिदोषतः ।। ७ ।।

The eight types of *bastis* (bladders used as receptacles) which are not to be used for the administration of enema, and the complications arising out of their use are as follows :

Characteristics of Bladder	**Complications Arising Out of Their Use**
(1) *Viṣama* (irregular in shape)	*Gati-vaiṣamya* (irregular flow of enema-fluid)
(2) *Māṃsala* (fleshy)	*Visratva* (making the enema-fluid smell fleshy)
(3) *Chinna* (torn)	*Srāva* (leakage of the fluid)
(4) *Sthūla* (thick)	*Daurgrāhya* (difficulty in handling)
(5) *Jālika* (having net-work of small perforations)	*Nisrava* (exudation of enema-fluid from the receptacle)
(6) *Vātala* (having air bubbles inside)	*Phenila* (frothiness of fluid)
(7) *Ati-snigdha* (excessively unctuous)	*Cyuti* (slipping away of the receptacle)
(8) *Klinna* (putrified)	*Adhāryatva* (inability to hold the receptacle) [6-7]

Defective Techniques Employed by Physicians

सवातातिद्रुतोत्क्षिप्ततिर्यगुल्लुप्तकम्पिताः ।
अतिबाह्यगमन्दातिवेगदोषाः प्रणेतृतः ।। ८ ।।

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The defective techniques employed by the (ignorant) physician for administering *basti* are as follows :

(1) *Savāta* (pushing the enema-fluid along with air);

(2) *Atidruta* (pushing the enema-fluid too rapidly);

(3) *Utkṣipta* (injecting the enema-fluid too high);

(4) *Tiryak* (injecting the enema-fluid obliquely);

(5) *Ullupta* (pushing the enema-fluid again after interruption);

(6) *Kampita* (shaking the nozzle while injecting the enema-fluid);

(7) *Atiga* (excessive insertion of the nozzle);

(8) *Bāhyaga* (wrong pushing so that instead of entering the anal canal, the enema-fluid flows outside); and

(9) *Mandāti-vega* (compressing the receptacle either too slowly so that the enema-fluid does not reach the colon, or too forcibly as a result of which the enema-fluid rapidly enters and reaches the distant part of the alimentary canal). [8]

Complications Arising Out of Anucchvāsa, etc., and Their Treatment

अनुच्छ्वास्य च बद्धे वा दत्ते निःशेष एव वा।
प्रविश्य कुपितो वायुः शूलतोदकरो भवेत्।।९।।
तत्राभ्यङ्गो गुदे स्वेदो वातघ्नान्यशनानि च।

If the enema receptacle is tied to the nozzle without taking out the air from the bladder, or if the entire amount of fluid is rushed into the rectum without leaving any residue in the bladder (*basti*), then the *vāyu* (air) entering into the rectum causes colic pain and piercing pain.

In such a condition, massage and fomentation should be given over the anus, and the patient should be given *vāyu*-alleviating food. [9 - $^{1}/_{2}$ 10]

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In *Siddhi* 3 : 16, giving enema without taking out the air from the bladder (receptacle), etc., is prohibited. But such things may happen by mistake. Therefore, treatment of the complications arising out of these mistakes is described here again.

Complications Arising Out of Rapid Insertion of Nozzle, etc., and Their Treatment

द्रुतं प्रणीते निष्कृष्टे सहसोत्क्षिप्त एव वा।।१०।।
स्यात् कटीगुदजङ्घार्तिबस्तिस्तम्भोरुवेदनाः।
भोजनं तत्र वातघ्नं स्नेहाः स्वेदाः सबस्तयः।।११।।

If the nozzle is inserted rapidly, if it is taken out hurriedly, and if it is pushed very high, then there will be pain in the lumbar region, anus and calf region; stiffness of the bladder, and pain in the thighs. In such cases, the patient should be given *vāyu*-alleviating food, oleation, fomentation and enema therapy. [$^{1}/_{2}$ 10 - 11]

The enema therapy, described above, should be given with *vāyu*-alleviating drugs.

Complications Caused by Oblique Insertion of Nozzle, etc., and Their Treatment

तिर्यग्वल्यावृतद्वारे बद्धे वाऽपि न गच्छति।
नेत्रे तदृजु निष्कृष्य संशोध्य च प्रवेशयेत्।।१२।।

If the enema nozzle is inserted obliquely, if the passage is obstructed by the anal sphincters, and if there is blockage because of the (fibres in the) recipe itself, then the fluid will not flow into the rectum.

In that case, the nozzle should be taken out, (the passage of the nozzle should be) cleaned, and the nozzle should be inserted again straight. [12]

While describing the management of the adverse effects caused by oblique insertion, other factors which also cause obstruction to the passage of the enema-fluid are described here again.

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Complications Arising From Interrupted Administration of Basti, and Their Treatment

पीड्यमानेऽन्तरा मुक्ते गुदे प्रतिहतोऽनिलः।
उरःशिरोर्तिमूर्वोश्च सदनं जनयेद्बली।। १३।।
बस्तिः स्यात्तत्र बिल्वादिफलश्यामादिमूत्रवान्।

If the enema-receptacle is compressed again after an interruption, then the aggravated *vāyu* being obstructed in the rectum causes pain in the chest and head, and prostration of the thighs.

In such a condition, the recipe prepared of *Bilvādi* (*Daśa-mūla*), *Phalādi* and *Śyāmādi* groups of drugs mixed with cow's urine should be given as enema. [13 - $^{1}/_{2}$ 14]

Complications Caused by Shaking of Nozzle During Administration of Basti, and Their Treatment

स्याद्दाहो दवथुः शोफः कम्पनाभिहते गुदे।। १४।।
कषायमधुराः शीताः सेकास्तत्र सबस्तयः।

If the anus gets injured because of the shaking of the nozzle, then there will be burning sensation, sneezing and oedema. In such conditions, the patient should be given astringent, sweet and cold affusion along with enema.

[14 $^{1}/_{2}$ - $^{1}/_{2}$ 15]

Complications Caused by Excessive Penetration of Nozzle, and Their Treatment

अतिमात्रप्रणीतेन नेत्रेण क्षणनाद्वलेः।। १५।।
स्यात् सार्ति दाहनिस्तोदगुदवर्चःप्रवर्तनम्।
तत्र सर्पिः पिचुः क्षीरं पिच्छाबस्तिश्च शस्यते।। १६।।

If the nozzle is excessively penetrated (or inserted repeatedly), then it causes injury to the anal sphincters leading to pain, burning sensation, pricking pain, prolapse of the anus and discharge of fecal matter.

In such conditions, *sarpi-picu* (pack of ghee-soaked cotton-pad) should be applied over the anus. Milk and *picchā-*

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basti (mucilagenous enema) are useful in this condition. [15 $^{1}/_{2}$ - 16]

Effects of Slow Enema, and Their Management

न भावयति मन्दस्तु बाह्यस्त्वाशु निवर्तते।
स्नेहस्तत्र पुनः सम्यक् प्रणेयः सिद्धिमिच्छता।। १७।।

If the receptacle is inadeqately compressed, then the enema-fluid does not reach its destination, and comes out quickly.

In such a condition, *anuvāsana-basti* should be administered appropriately again by the physician desirous of success of treatment. [17]

Effects of Forceful Administration of Enema, and Their Treatment

अतिप्रपीडितः कोष्ठे तिष्ठत्यायाति वा गलम्।
तत्र बस्तिविरेकश्च गलपीडादि कर्म च।। १८।।

If the enema-fluid is injected with excess of force, then the fluid either gets retained in the gastro-intestinal tract, or goes up to reach the throat.

In such cases, the patient should be given enema and purgation (if the fluid gets retained in the alimentary tract) or *gala-pīḍā* (application of pressure in the throat) etc., (if the fluid tends to come up from the throat). [18]

In the previous chapter, this condition is described to be caused by the administration of *anuvāsana-basti* (enema) on empty stomach. In the above text, this condition is described to be caused by the administration of *nirūha* or *anuvāsana* with excess of pressure over the receptacle of enema.

Epilogue

तत्र श्लोकः—
नेत्रबस्तिप्रणेतृणां दोषानेतान् सभेषजान्।
वेत्ति यस्तेन मतिमान् बस्तिकर्माणि कारयेत्।। १९।।

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To sum up :

The physician who is conversant with the defects of *netra* (nozzle) and *basti* (receptacle of enema), the effects of wrongful technique applied by the administrator, and treatment of the complications arising out of these factors, should be utilised by a wise person to administer *basti* (enema) therapy.

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढ-
बलसंपूरिते सिद्धिस्थाने नेत्रबस्तिव्यापत्सि-
द्धिर्नाम पञ्चमोऽध्यायः ।। ५ ।।

Thus, ends the Fifth chapter of *Siddhi-sthāna* dealing with "the Success in Treatment of Complications Caused by the Use of Improper Nozzle and Receptacle" of Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - VI

षष्ठोऽध्यायः

(COMPLICATIONS OF WRONGLY ADMINISTERED EMETIC AND PURGATION THERAPIES AND THEIR SUCCESSFUL TREATMENT)

Prologue

अथाऽतो वमनविरेचनव्यापत्सिद्धिं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

Now we shall expound the chapter on "the Successful Treatment of Complications Arising Out of Wrongly Administered Emetic and Purgation Therapies".

Thus, said Lord Ātreya. [1-2]

In the previous chapter, complications arising from the use of defective nozzle, etc., are described. In the same context, the complications arising out of wrongly administered emetic and purgation therapies are being explained in this chapter. Since *basti* (medicated enema) is administered after emetic and purgation therapies, the complications arising out of *basti* will be described in the next chapter (no. VII). A full chapter is exclusively devoted to the description of complications arising out of the wrong administration of *basti* because of the importance of this therapy (vide *Siddhi* 1 : 39-40).

In addtion to complications, even the normal methods of administration of emesis and purgation are described in this chapter to show that complications will arise in future if these normal procedures are violated.

Topics to be Discussed in the Chapter

अथ शोधनयोः सम्यग्विधिमूर्ध्वानुलोमयोः।
असम्यक्कृतयोश्चैव दोषान् वक्ष्यामि सौषधान्।।३।।

Now the topics to be described in this chapter are as follows :

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(1) Appropriate methods for the administration of the upward and downward purificatory therapies (emesis and purgation);

(2) Complications arising out of the improper administration of these therapies; and

(3) Treatment of these complications. [3]

The methods of administering emesis and purgation are already described in the first chapter of *Siddhi-sthāna* and fifteenth chapter of *Sūtra-sthāna*. In the present chapter, some of the topics earlier described are repeated because of contextual propriety, and many new topics which were not described earlier are elaborated (vide verse no. 8).

Suitable Seasons

अत्युष्णवर्षशीता हि ग्रीष्मवर्षाहिमागमाः।
तदन्तरे प्रावृडाद्यास्तेषां साधारणास्त्रयः।। ४।।
प्रावृट् शुचिनभौ ज्ञेयौ शरदूर्जसहौ पुनः।
तपस्यश्च मधुश्चैव वसन्तः शोधनं प्रति।। ५।।
एतानृतून् विकल्प्यैवं दद्यात् संशोधनं भिषक्।
स्वस्थवृत्तमभिप्रेत्य व्याधौ व्याधिवशेन तु।। ६।।

Grīṣma (summer), *varṣā* (rainy season) and *himāgama* or *hemanta* (winter) are characterised by excessive heat, rain and cold respectively. The three intervening seasons, viz., *prāvṛṭ* (the period between summer and rainy season), [*śarat* or autumn (the period between rainy season and winter) and *vasanta* or spring (the period between winter and summer)] are of general nature.

The months composing the three seasons of general nature are as follows :

(1) *Prāvṛṭ* (approx. June-August) is composed of *śuci* or *āṣāḍa* (June-July) and *nabha* or *śrāvaṇa* (July-August);

(2) *Śarat* or Autumn (approx. October-December) is composed of *ūrja* or *kārtika* (October-November) and *saha* or *mārgaśīrṣa* (November-December); and

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(3) *Vasanta* or spring (approx. February-April) is composed of *tapasya* or *phālguna* (February-March) and *madhu* or *caitra* (March-April).

The above mentioned three seasons are suitable for the administration of elimination therapies.

After determining the exact months constituting the above mentioned seasons, the physician should give appropriate elimination therapies to a healthy person. However, for a patient, the appropriateness of the time (season) should be determined on the basis of the nature of the diseases.

[4-6]

In the context of *svastha-vṛtta* (adoption of measures for the prevention of diseases in a healthy person) and *rasotpatti* (manifestation of different types of tastes), the year is divided differently into six seasons, viz., *varṣā* (Rainy season), *śarat* (Autumn), *hemanta* (early Winter), *śiśira* (late Winter), *vasanta* (Spring) and *grīṣma* (Summer) - vide *Sūtra* 6 : 4.

In *Caraka-saṃskāra* (Agniveśa's work as redacted by Caraka), *caitra*, *śrāvaṇa* and *agrahāyaṇa* or *mārgaśīrṣa* are described to be suitable for the aministration of emetic, enema and purgation therapies respectively (vide *Sūtra* 7 : 46).

In *Vimāna* 8 : 125 -128, divisions of the year into six seasons (by excluding *śiśira* and including *prāvṛt*) has been mentioned keeping in view the administration of elimination therapies.

Thus, the six seasons into which the year is classified here by the preceptor are only to determine the good period for the administration of elimination therapies though these are different from the actual classification of the year based on seasonal characteristics.

Some physicians explain these two types of classification of the seasons of the year in a different way. According to them, in the northern side of the river Gaṅgā, the winter lasts for a longer period, and there is less of rain because of which the year is classified into six seasons as *grīṣma, varṣā, śarat, hemanta* (early winter), *śiśira* (late winter) and *vasanta*. But in the southern side of the Gaṅgā, because of longer period of rain and less of winter, the six seasons are *grīṣma, prāvṛt* (early part of the rainy season), *varṣā* (actual rainy season), *śarat, hemanta* and *vasanta*. This explanation is not correct because in that case the

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statement "*śodhanaṃ prati* i.e. the description here is keeping in view the administration of elimination therapy" in the above text does not hold good.

[The two types of seasonal classification of the year are summarised below :

Classification of the year for *Svastha-vṛtta* and *Rasotpatti* (vide *Caraka* : *Sūtra* 6 : 4)	**Months according to Indian Calender**	**Months according to Gregorian Calender (approx.)**	**Classification of the Year for Elimination Therapy (vide *Caraka : Sūtra* 7:46, *Caraka* : *Siddhi* 6 : 5)**
Vasanta (Spring)	*Vaiśākha*	April-May	*Grīṣma* (Summer)
Grīṣma (Summer)	*Jyeṣṭha*	May-June	
	Āṣāḍha	June-July	*Prāvṛṭ* (early part of rainy season)
Varṣā (Rainy season)	*Śrāvaṇa*	July-August	
	Bhādrapada	August-Sept.	*Varṣā* (actual rainy season)
Śarat (Autumn)	*Āśvina*	Sept.-Oct.	
	Kārtika	Oct.-Nov.	*Śarat* (Autumn)
Hemanta (Early winter)	*Mārgaśīrṣa*	Nov.-Dec.	
	Pauṣa	Dec.-January	*Hemanta* (Winter)
Śiśira (Late winter)	*Māgha*	Jan.-February	
	Phālguna	Feb.-March	*Vasanta* (Spring)
Vasanta (Spring)	*Caitra*	March-April	

[*Śiśira, vasanta* and *grīṣma* constitute *ādāna-kāla* of the period of absorption; and *varṣā, śarat* and *hemanta* constitute *visarga-kāla* or the period of elimination.]

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Eventhough, on regional basis [northern and sourthern parts of the river Gaṅgā], there is actually a seasonal difference as stated earlier, in the present context, however, the Preceptor's statement does not imply that. This has already been explained in detail in the commentary of *Sūtra* 7 : 46.

The appropriate time (season) described here does not hold good in the case of patients suffering from serious diseases needing emergency treatment. In such situations, heat, etc., of the summer should be counteracted by creating cooling environment, and these elimination therapies can be administered as described in *Vimāna* 8 : 127.

Administration of Oleation and Fomentation in Intervals

कर्मणां वमनादीनामन्तरेष्वन्तरेषु च।
स्नेहस्वेदौ प्रयुञ्जीत स्नेहं चान्ते प्रयोजयेत्।। ७।।

During the interval period between two therapies, viz., emesis, etc., the patient should be given oleation and fomentation therapies, and at the end of each therapy, oleation therapy should again be given. [7]

If purgation therapy is to be administered after emetic therapy, and if enema therapy is to be administered after purgation therapy, then oleation and fomentation should be appropriately done before the second therapy. One should not be under the impression that oleation and fomentation in the beginning of *pañca-karma* (emetic) therapy is sufficient for the rest of the therapies. At the end of each elimination therapy, medicated ghee, etc., should again be administered for the alleviation of residual *doṣas*, and also to overcome the fatigue caused by the earlier administered elimiantion therapy.

Prohibition of Excessive Oleation

विसर्पपिडकाशोफकामलापाण्डुरोगिणः ।
अभिघातविषार्ताश्च नातिस्निग्धान् विरेचयेत्।। ८।।

Purgation therapy is to be given to the patient suffering from *visarpa* (erysipelas), *piḍakā* (pimples), *śopha* (oedema), *kāmalā* (jaundice), *pāṇḍu* (anemia), injury and poisoning only when the patient is not excessively oleated. [8]

Nature of Purgative Recipe

नातिस्निग्धशरीराय दद्यात् स्नेहविरेचनम्।
स्नेहोत्क्लिष्टशरीराय रूक्षं दद्याद्विरेचनम्।। ९।।

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Unctuous recipe for purgation should not be given to a patient whose body is excessively oleated. If the unctuous element in the body of the patient is excited, then he should be given a purgation therapy recipe of which is ununctuous in nature. [9]

If the body of the patient is not appropriately oleated, then the administration of unctuous purgation therapy may not produce the desired effect (*ayoga*) for which the purgation therapy is prohibited. If the body is oleated in excess then unctuous purgation therapy, because of excess of unctuousness, moves quickly as a result of which it becomes incapable of eliminating even the excited *doṣas*. Because of this, the *doṣas* displaced from their own habitat get adhered to the channels of circulation. In order to prevent such a situation, ununctuous purgative therapy should be given to these patients which produces the appropriate effect (*samyag-yoga*).

Conditions Responsible for Appropriate Effect

स्नेहस्वेदोपपन्नेन जीर्णे मात्रावदौषधम्।
एकाग्रमनसा पीतं सम्यग्योगाय कल्पते।। १०।।

Factors responsible for appropriate effect (*samyag-yoga*) [of the purgation therapy] are the following :

(1) The patient should have taken oleation and fomentation therapies; [to be further explained in the verse nos. 11-13];

(2) The purgation therapy should be given only after the previous meal is digested; [to be further explained in verse no. 14];

(3) The purgation therapy should be given in appropriate dose; [to be further explained in verse nos. 15-16]; and

(4) The patient should take the therapy with concentration of mind. [to be further explained in the verse no. 17].

[10]

Regarding the appropriate dose of purgation therapy, the recipe should be as far as possible in small dose but with quick action. This will

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be explained in detail in the verse nos. 15-16. While taking purgation the patient should have concentration of mind. If his mind is diverted or agitated because of passion, etc., then this will affect the urge for purgation as a result of which there will be less of effect of the therapy (*ayoga*).

Need for Oleation and Fomentation Therapies

स्निग्धात् पात्राद्यथा तोयमयत्नेन प्रणुद्यते।
कफादयः प्रणुद्यन्ते स्निग्धाद् देहात्तथौषधैः।। ११।।
आर्द्रं काष्ठं यथा वह्निर्विष्यन्दयति सर्वतः।
तथा स्निग्धस्य वै दोषान् स्वेदो विष्यन्दयेत् स्थिरान्।। १२।।
क्लिष्टं वासो यथोत्क्लेश्य मलः संशोध्यतेऽम्भसा।
स्नेहस्वेदैस्तथोत्क्लेश्य शोध्यते शोधनैर्मलः।। १३।।

As water can be taken out easily from a pot smeared with oil, similarly *kapha*, etc., can be taken out easily by therapies from the body of the patient who is oleated. As fire makes the liquid content of a piece of wet wood to ooze out in all the directions, similarly the fomentation therapy helps the stable (adhered) *doṣas* in an oleated person to get eliminated completely.

As the dirt adhered to a piece of dirty cloth gets detached [by the application of heat or hot steam and alkalies] which can be washed out easily by rinsing with water, similarly the *malas* (morbid and adhered *doṣas*) become detached by the application of oleation and fomentation therapies, and get eliminated by elimination therapy. [11 - 13]

Citation of several similes in the above text implies emphasis on the need for oleation and fomentation therapies before the administration of elimination therapies, viz., emesis, etc.

Digestion of Food

अजीर्णे वर्धते ग्लानिर्विबन्धश्चापि जायते।
पीतं संशोधनं चैव विपरीतं प्रवर्तते।। १४।।

If elimination therapies are administered before the previous meal is digested, then it gives rise to the following complications :

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(1) *Glāni* (depression);

(2) *Vibandha* (constipation); and

(3) The therapy works in the opposite way (i.e. the emetic therapy causes purgation and the purgative therapy causes emesis). [14]

Appropriate Dose

अल्पमात्रं महावेगं बहुदोषहरं सुखम्।
लघुपाकं सुखास्वादं प्रीणनं व्याधिनाशनम्।। १५।।
अविकारि च व्यापत्तौ नातिग्लानिकरं च यत्।
गन्धवर्णरसोपेतं विद्यान्मात्रावदौषधम्।। १६।।

Appropriate dose of the recipe for elimination therapies is characterised as follows :

(1) It should be small in quantity, but quick in action;

(2) It should be able to eliminate morbid *doṣas* in large quantity but easily;

(3) It should be light for digestion, palatable, pleasing and curative of the concerned disease;

(4) It should not cause serious complications;

(5) It should not cause depression in excess; and

(6) It should possess agreeable smell, colour and taste. [15-16]

Although aggreeable taste, etc., are not directly relevant to the dose for the effect of a recipe, even then these are described in the above text so that the recipe is appropriately processed for excellent results. Agreeable taste, etc., are no doubt, the attributes of the drug (*dravya*) and not of the dose. But a recipe containing drugs having agreeable taste, etc., contributes to the excellence of the recipe for which these factors are included here.

Concentration of Mind

विधूय मानसान् दोषान् कामादीनशुभोदयान्।
एकाग्रमनसा पीतं सम्यग्योगाय कल्पते।। १७।।

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Passion, etc., are inauspicious impurities of the mind. If a person whose mind is cleansed of these impurities, and whose mind is concentrated on the therapy, takes recipes for the elimination of morbid matter, then appropriate effects (*samyag-yoga*) of the therapy are produced. [17]

Preparatory Measures

नरः श्वो वमनं पाता भुञ्जीत कफवर्धनम्।
सुजरं द्रवभूयिष्ठं, लघ्वशीतं विरेचनम्।। १८।।
उत्क्लिष्टाल्पकफत्वेन क्षिप्रं दोषाः स्रवन्ति हि।

The person scheduled to take the emetic therapy the next day should eat *kapha*-aggravating diet which is easy for digestion and which is mostly of liquid nature (in the night of the previous day). The person scheduled to take purgation therapy the next day should take diet which is light and hot.

Because of the aforesaid diet, the *kapha* gets excited or aggravated (in the patient who is to be given emesis the next morning). In the case of the patient who is to be given purgation therapy in the next morning, intake of the above mentioned light and hot diet during the previous night causes reduction (*alpa*) of *kapha*. As a result of this [the emesis and prugation therapies] help in the elimination of *doṣas* quickly. [18 - $^{1}/_{2}$ 19]

The diet to be taken during the night before the administration of emesis, etc., is already described. Because of the contextual propriety, and also in order to provide more specific information, this topic is discussed again.

Emetic therapy acts quickly if the *kapha* is in a state of aggravation or excitement, and purgation therapy works quickly if there is less of *kapha*.

Signs of Appropriate Purification

पीतौषधस्य तु भिषक् शुद्धिलिङ्गानि लक्षयेत्।। १९।।
ऊर्ध्वं कफानुगे पित्ते विट्पित्तेऽनुकफे त्वधः।
हृतदोषं वदेत् काश्यदौर्बल्ये चेत् सलाघवे।। २०।।

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After the therapy is administered, the physician should keep observing the appearance of signs of appropriate purification which are as follows :

(1) In the case of emesis, the bile appears after the elimination of *kapha*;

(2) In the case of purgation, *kapha* appears after the voiding of stool and bile; and

(3) After the therapies (both emesis and purgation), the body becomes emaciated, weak and light.

Appearance of the above signs indicates appropriate elimination of the (morbid) *doṣas*. [19 $^{1}/_{2}$ - 20]

Although the signs of appropriately administered emesis and purgation are already described before, even then the topic is discussed above again in order to furnish some additional specific information.

Coming out of *pitta* at the end of emesis, and of *kapha* at the end of purgation, as described before, may occur even in inappropriate purification (*asamyak-śuddhi*). Therefore, additionally associated signs like emaciation, weakness and lightness of the body are described here in order to indicate the appropriate purification.

Measures to Remove Residual Drugs

वामयेत्तु ततः शेषमौषधं न त्वलाघवे।
स्तैमित्येऽनिलसङ्गे च निरुद्गारेऽपि वामयेत्।। २१।।
आलाघवात्तनुत्वाच्च कफस्यापत् परं भवेत्।

The patient should be given emetic therapy to remove the residual drugs (provided all the signs of appropriate administration of elimination therapy are observed). But if only lightness of the body is not observed (in spite of the presence of the remaining signs), then emesis should not be given.

If there is *staimitya* (a feeling as if the body is covered with a wet skin) and occlusion of *vāyu*, then emetic therapy should be administered, even if there is no eructation, till there is lightness of the body and thinness of *kapha*. Giving

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emesis thereafter leads to serious consequences.[21 - $^{1}/_{2}$ 22]

The second line of the verse no. 21 is interpreted differently by others. According to them, emesis should be given even if there is *staimitya*, occlusion of *vāyu* and absence of eructation.

After-care

वमिते वर्धते वह्निः शमं दोषा व्रजन्ति हि।। २२।।
वमितं लङ्घयेत् सम्यग्जीर्णलिङ्गान्यलक्षयन्।
तानि दृष्ट्वा तु पेयादिक्रमं कुर्यान्न लङ्घनम्।। २३।।

Emesis promotes the *agni* (power of digestion) [after some time], and alleviates *doṣas*. After emesis, the patient should keep fast till the appearance of the signs of proper digestion of the medicines. After having observed these signs, the patient should be given regulated diet in the form of *peyā* (thin gruel), etc., and he should not be made to keep fast any more. [22 $^{1}/_{2}$ - 23]

The signs of proper digestion will be described in the verse no. 26.

Need for Regulated Diet

संशोधनाभ्यां शुद्धस्य हृतदोषस्य देहिनः।
यात्यग्निर्मन्दतां तस्मात् क्रमं पेयादिमाचरेत्।। २४।।

[Immediately] after purification of the body, and elimination of *doṣas* from the body by emetic and purgation therapies, the *agni* (power of digestion and metabolism) in a person gets subdued. Therefore, for him, controlled diet in the form of *peyā* (thin gruel), etc., is recommended. [24]

After *nirūha-basti, agni* gets only mildly subdued for which regulated diet in the form of *peyā,* etc., is not essential. On the other hand, after emesis and purgation therapies, suppression of the *agni* is much more. To highlight this point, the term '*saṃśodhanābhyāṃ*' is used here in dual number to include only emetic and purgation therapies (and not *nirūha-basti*).

In *Siddhi* 1 : 17 (and also in verse 22 of this chapter) *agni* is stated to get stimulated after elimination therapies. This statement refers to a relative activation of *agni* in comparison to its earlier suppressed state because of excessive agitation by the drugs used in these therapies.

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Therefore, the present statement is not a contradiction of the earlier one(s).

Dietetic Regimen

कफपित्ते विशुद्धेऽल्पं मद्यपे वातपैत्तिके।
तर्पणादिक्रमं कुर्यात् पेयाऽभिष्यन्दयेद्धि तान्।। २५।।

If *kapha* and *pitta* are cleansed on partially because of *alpa-yoga* or less effect (of emetic and purgation therapies), if the patient is addicted to alcohol, and if he suffers from *vātika* or *paittika* diseases, then he should be given the regulated diet in the form of *tarpaṇa* or demulcent drinks, etc., because *peyā* (thin gruel), etc., produces *abhiṣyandī* effect (i.e. obstruction to the channels of circulation) in such cases. [25]

Normally, after emetic and purgation therapies, the patient should be given *peyā* (thin gruel), *vilepī* (thick gruel), *akṛta-yūṣa* (unsizzled vegetable-soup), *kṛta-yūṣa* (sizzled meat-soup). But in the condition described above, the patient should be given *svaccha-tarpaṇa* (transparent or thin demulcent drink) in the place of *peyā* (thin gruel), and *ghana-tarpaṇa* (thick demulcent drink) in the place of *vilepī* (thick gruel).

Signs of Drug-digestion

अनुलोमोऽनिलः स्वास्थ्यं क्षुत्तृष्णोर्जो मनस्विता।
लघुत्वमिन्द्रियोद्गारशुद्धिर्जीर्णौषधाकृतिः ।। २६।।

Signs of complete digestion of drugs used in the recipe are as follows :

(1) Downward movement of the wind in the intestine;
(2) A sense of well-being;
(3) Proper hunger and thirst
(4) Feeling of energy (promotion of strength) and self-confidence;
(5) Lightness of the body;
(6) Clarity (excellence in the functioning) of senses; and
(7) Purity of eructations (without the smell of drugs).

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Signs of Residual Drugs

क्लमो दाहोऽङ्गसदनं भ्रमो मूर्च्छा शिरोरुजा।
अरतिर्बलहानिश्च सावशेषौषधाकृतिः।। २७।।

If the drugs of the recipe are not fully digested, and a part remains undigested, then this gives rise to the following signs :

(1) *Klama* (mental fatigue);

(2) Burning sensation;

(3) Prostration of limbs;

(4) Giddiness;

(5) Fainting;

(6) Headache;

(7) Disliking for everything around; and

(8) Diminution of strength. [27]

Characteristics of Drugs Producing Undesirable Effects

अकालेऽल्पातिमात्रं च पुराणं न च भावितम्।
असम्यक्संस्कृतं चैव व्यापद्येतौषधं द्रुतम्।। २८।।

Drugs of the following nature, if used in the recipes for elimination therapies, produce adverse effects quickly :

(1) Unseasonal and untimely collected drugs;

(2) Administration in less or excess dose;

(3) Storage for a longer period after collection;

(4) Used without proper impregnation; and

(5) Improperly processed. [28]

Adverse Effects and Their Causative Factors

आध्मानं परिकर्तिश्च स्रावो हृद्गात्रयोर्ग्रहः।
जीवादानं सविभ्रंशः स्तम्भः सोपद्रवः क्लमः।। २९।।
अयोगादतियोगाच्च दशैता व्यापदो मताः।
प्रेष्यभैषज्यवैद्यानां वैगुण्यादातुरस्य च।। ३०।।

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Emetic and Purgative therapies may produce ten adverse effects (*vyāpat*) as follows :

(1) *Ādhmāna* or flatulence (caused by *ayoga* or under action of the recipe);

(2) *Pari-kartikā* or gripping pain (caused by *ati-yoga* or overaction of the recipe);

(3) *Srāva* or excessive discharge (caused by *ayoga*);

(4) *Hṛd-graha* or stiffness in the cardiac region (caused by *ayoga*);

(5) *Gātra-graha* or stiffness of the body (caused by *ayoga*);

(6) *Jīvādāna* or bleeding (caused by *ati-yoga*);

(7) *Vibhraṃśa*, i.e. *guda-bhraṃśa* or prolapsed rectum, *sañjñā-bhraṃśa* or mental perversion (caused by *ati-yoga*), and others like itching (caused by *ayoga*);

(8) *Stambha* or rigidity;

(9) *Upadrava* or complications (caused by *ayoga*); and

(10) *Klama* or mental fatigue (caused by *ayoga*).

The above mentioned adverse effects arise out of the *ayoga* (underaction) and *ati-yoga* (overaction) of the recipe because of the following :

(1) *Preṣya-vaiguṇya* (defect in the attendant);

(2) *Bhaiṣajya-vaiguṇya* (defect in the recipe);

(3) *Vaidya-vaiguṇya* (defect in the physician); and

(4) *Ātura-vaiguṇya* (defect in the patient). [29 - 30]

Ten adverse effects described above include *ādhmāna*, etc., and *upadrava* (complications). Separate mention of *upadrava* implies the other complications arising exclusively out of *ayoga* (underaction) and *ati-yoga* (overactin) of the recipe.

The signs of *ayoga* (underaction) and *ati-yoga* (overaction) of recipes and their management will be described in detail later in this chapter.

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Adverse effects are manifested by three defects, viz., *ayoga, ati-yoga* and *mithyā-yoga* (wrong action) of the recipe. But in the context of emetic and purgation therapies, the third category is not relevant. *Doṣas* are eliminated in four different ways, viz., *ati-pravṛtti* (excessive elimination), *asamyak-pravṛtti* (improper elimination), *apravṛtti* (non-elimination) and *alpa-pravṛtti* (elimiantion in less quantity). Of these four categories, *apravṛtti* and *alpa-pravṛtti* are included in *ayoga* (underaction) of the therapy. This *ayoga* also includes action of the drug in the reverse order (vide next verse no. 31).

Different Types of Actions of Elimination Therapies

योगः सम्यक्प्रवृत्तिः स्यादतियोगोऽतिवर्तनम्।
अयोगः प्रातिलोम्येन न चाल्पं वा प्रवर्तनम्।। ३१।।

Emesis and purgation therapies act in three different ways as follows :

(1) *Yoga* or appropriate action resulting in proper elimination of *doṣas*;

(2) *Ati-yoga* or overaction which causes excessive elimination of *doṣas*; and

(3) *Ayoga* or underaction which causes action of the drug in the reverse order, non-elimination of *doṣas,* or their elimination in less quantity. [31]

Pratiloma-pravṛtti or movement in the reverse direction causes purgation by the emetic therapy, and emesis by the purgation therapy. Since movement in the reverse direction does not cause appropriate elimination of the concerned *doṣas*, it is included under *ayoga* or under-action.

Movement in Reverse Direction

श्लेष्मोत्क्लिष्टेन दुर्गन्धमहृद्यमति वा बहु।
विरेचनमजीर्णे च पीतमूर्ध्वं प्रवर्तते।। ३२।।
क्षुधार्तमृदुकोष्ठाभ्यां स्वल्पोत्क्लिष्टकफेन वा।
तीक्ष्णं पीतं स्थितं क्षुब्धं वमनं स्याद्विरेचनम्।। ३३।।
प्रातिलोम्येन दोषाणां हरणात्ते ह्यकृत्स्नशः।
अयोगसंज्ञे, कृच्छ्रेण याति दोषो न वाऽल्पशः।। ३४।।

Intake of purgation therapy by a person with excited

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(aggravated) *kapha* may produce action in reverse direction (i.e. it may cause emesis) because of the following factors :

(1) Foul odour of the recipe;

(2) Unpalatability of the recipe;

(3) Large quantity of the recipe; and

(4) Intake of the recipe before the previous meal is digested.

Similarly, emetic therapy may produce purgation because of the following factors :

(1) Affliction of the patient with hunger;

(2) Laxed bowel;

(3) Less excitement of *kapha*;

(4) *Tīkṣṇa* (sharp) nature of the drug;

(5) *Sthita* or stagnation of the recipe; and

(6) *Kṣubdha* or agitating nature of the recipe.

If the emetic and purgation therapies produce action in the reverse order, then they become incapable of eliminating the morbid matter in its entirety. Thus, these conditions are called *ayoga* (inappropriate or underaction). In these conditions, the morbid *doṣas* get eliminated with difficulty or they do not get eliminated at all or they get eliminated only in small quantity. [32 - 34]

[The term '*sthitam*' in the verse no. 33 has been interpreted by Cakrapāṇi as "sudden upward movement". There seems to be some error in this part of the commentary.]

In the place of "*kṛcchreṇa yāti doṣo na vā'lpaśaḥ*" in the verse no. 34, there is a variant reading as "*kṛcchreṇa yadā gacchati cālapaśaḥ*". If this latter reading is accepted, then it implies "difficulty in the elimination because the output of morbid *doṣas* is only in small quantity".

Indigestion of Recipe

पीतौषधो न शुद्धश्चेज्जीर्णे तस्मिन् पुनः पिबेत्।
औषधं न त्वजीर्णेऽन्यद्भयं स्यादतियोगतः।। ३५।।

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If the medicine taken for emesis and purgation does not produce the appropriate cleansing effect, then after its digestion, the therapy should be administered again (on the same day). Before the digestion of earlier recipe, the therapy should not be repeated. Repetition of the therapy may lead to *ati-yoga* (excessive action). [35]

Repetition of Therapy

कोष्ठस्य गुरुतां ज्ञात्वा लघुत्वं बलमेव च।
अयोगे मृदु वा दद्यादौषधं तीक्ष्णमेव वा।। ३६।।

If there is *ayoga* (underaction), then after ascertaining the nature of the bowel (hard bowel or laxed bowel) and the strength, the patient should be given [repeated dose] of the medicine which is either *mṛdu* (mild) or *tīkṣṇa* (sharp or strong) in nature. [36]

If there is hard bowel (*krūra-koṣṭha*), then the patient should be given the recipe containing strongly acting drugs of *tīkṣṇa* (sharp) nature as the repeat dose. If there is laxed bowel (*mṛdu-koṣṭha*), then the patient should be given the recipe containing mildly acting drugs of *mṛdu* (soft) nature.

Avoiding Repeat-dose

वमनं न तु दुश्छर्दं दुष्कोष्ठं न विरेचनम्।
पाययेतौषधं भूयो हन्यात् पीतं पुनर्हि तौ।। ३७।।

If the patient is a bad subject for emesis, then second emetic dose should not be given. Similarly, a second purgative dose should not be given if the patient is hard boweled. Repeat dose for emesis and purgation to these two categories of patients may lead to their death. [37]

Causes and Complications of Ayoga

अस्निग्धास्विन्नदेहस्य रूक्षस्यानवमौषधम्।
दोषानुत्क्लिश्य निर्हर्तुमशक्तं जनयेद्गदान्।। ३८।।
विभ्रंशं श्वयथुं हिक्कां तमसो दर्शनं भृशम्।
पिण्डिकोद्वेष्टनं कण्डूमूर्वोः सादं विवर्णताम्।। ३९।।

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If the patient is not oleated and fomented, if there is ununctuousness in his body and the ingredients of the recipe have become old (stored for a long time as a result of which their potency is diminished), then in such a situation, the therapy becomes incapable of (completely) eliminating the morbid *doṣas* after causing their excitation. This gives rise to ailments like *vibhraṃśa* (action in reverse direction), oedema, hiccup, excessive fainting, cramps in the calf region, itching, asthenia of the thighs and discoloration of the skin.

[38 - 39]

Another Type of Ayoga and Its Management

स्निग्धस्विन्नस्य चात्यल्पं दीप्ताग्नेर्जीर्णमौषधम्।
शीतैर्वा स्तब्धमामे वा दोषानुत्क्लिश्य नाहरेत्।। ४०।।
तानेव जनयेद्रोगानयोगः सर्व एव सः।
विज्ञाय मतिमांस्तत्र यथोक्तां कारयेत् क्रियाम्।। ४१।।

Even in a person who is properly oleated and fomented, the *doṣas* which are already excited do not get eliminated because of the following factors :

(1) If the recipe is administered in a very small dose;

(2) If the patient has strong power of digestion (*dīptāgni*) as a result of which the recipe administered in small dose itself gets digested (without producing its effects);

(3) If the recipe has become ineffective (*stabdha*) because of cold ingredients; and

(4) If the recipe is taken when the body of the patient is afflicted with *āma* (product of improper digestion and metabolism).

In the above mentioned conditions, all the complications (like *vibhraṃśa* - vide verse nos. 38-39 above) are manifested. All these conditions are the result of *ayoga* (underaction of the purificatory recipe). Having determined this condition, a wise physician should treat them on the suggested lines (vide verse nos. 35-42). [40-41]

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Since the above mentioned three conditions have identical causative factors and treatment, these are described here after the verse nos. 38-39 as additional factors of *ayoga* (underaction). Similarly, additional factors of *ati-yoga* (overaction) will be described later.

Treatment of Ayoga

तं तैललवणाभ्यक्तं स्विन्नं प्रस्तरसङ्करैः।
पाययेत पुनर्जीर्णे समूत्रैर्वा निरूहयेत्।। ४२।।
निरूढं च रसैर्धान्वैर्भोजयित्वाऽनुवासयेत्।
फलमागधिकादारुसिद्धतैलेन मात्रया।। ४३।।
स्निग्धं वातहरैः स्नेहैः पुनस्तीक्ष्णेन शोधयेत्।
न चातितीक्ष्णेन ततो ह्यतियोगस्तु जायते।। ४४।।

After the digestion of the previously administered recipe, the patient should be given massage with oil mixed with salt, and fomented with *prastara* and *saṅkara* types of fomentation therapies (vide *Sūtra* 14 : 41 & 42). Thereafter, he should be given another dose of the purificatory recipe or may be given *nirūha* type of enema mixed with cow's urine.

After *nirūha-basti*, the patient should be given food along with the soup of the meat of animals living in arid zones. Thereafter, *anuvāsana-basti* should be given to him with the medicated oil prepared by boiling with *phala* (*madana-phala*), *māgadhikā* (*pippalī*) and *dāru* (*deva-dāru*) in appropriate dose.

Thereafter, he should be oleated with medicated fat prepared by cooking with *vāyu*-alleviating drugs. Then purificatory therapy with recipe containing *tīkṣṇa* (sharp) ingredients should be given again. Of course, the ingredients should not be exceedingly sharp because that may result in *ati-yoga* (over-action). [42-44]

Signs and Treatment of Ati-yoga

अतितीक्ष्णं क्षुधार्तस्य मृदुकोष्ठस्य भेषजम्।
हृत्वाऽऽशु विट्पित्तकफान् धातून्विस्रावयेद्बहून्।। ४५।।
बलस्वरक्षयं दाहं कण्ठशोषं भ्रमं तृषाम्।

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कुर्याच्च मधुरैस्तत्र शेषमौषधमुल्लिखेत्।। ४६।।
वमने तु विरेकः स्याद्विरेके वमनं पुनः।
परिषेकावगाहाद्यैः सुशीतैः स्तम्भयेच्च तत्।। ४७।।
कषायमधुरैः शीतैरन्नपानौषधैस्तथा।
रक्तपित्तातिसारघ्नैर्दाहज्वरहरैरपि ।। ४८।।

Exceedingly sharp medication given to a patient who is hungry, and who has laxed bowel quickly eliminates not only stool, *pitta* (bile) and *kapha* (phlegm), but also the liquid elements (tissues) of the body.

As a result of this there is loss of strength and voice, burning sensation, dryness of the throat, giddiness and morbid thirst.

In such a condition, the residual drugs should be eliminated with ingredients belonging to the group of sweet drugs (*Madhura-gaṇa*).

In the case of *ati-yoga* (over-action) of emetic therapy, the patient should be given purgation therapy, and in the case of over-action of purgation therapy, he should be given emesis.

The urge for vomiting and purgation in excess because of over-action may be arrested by the following :

(1) Exceedingly cold *pariṣeka* (sprinkling of water), *avagāha* (bath), etc.,

(2) Intake of food, drinks and medicaments which are cooling, astringent as well as sweet in taste; and

(3) Therapies which are curative of *rakta-pitta* (an ailment characterised by bleeding from different parts of the body), *atisāra* (diarrhoea), *dāha* (burning sensation) and *jvara* (fever). [45 - 48]

The above mentioned signs of *ati-yoga* refer to the over-action of purgation therapy because administration of this therapy to a patient who is hungry and who is of laxed bowel does eliminate feces, *pitta* and

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kapha in succession as described. The physician should infer the signs of overaction on the similar lines.

The above text can be interpreted differently to cover the over-action of both the emetic and purgation therapies inasmuch as excessively sharp (*ati-tīkṣṇa*) medicaments may cause over-action of the emetic therapy, and administration of medicines when the patient is very hungry and to a patient who has laxed bowel may cause overaction of the purgation therapy. The order of the elimination of stool, *pitta* and *kapha* should be appropriately changed and applied to both the emetic and purgation therapies.

Recipes for Treatment of Over-action of Purgation Therapy

अञ्जनं चन्दनोशीरमज्जासृक्शर्करोदकम्।
लाजचूर्णैः पिबेन्मन्थमतियोगहरं परम्।। ४९।।
शुङ्गाभिर्वा वटादीनां सिद्धां पेयां समाक्षिकाम्।
वर्चःसांग्राहिकैः सिद्धं क्षीरं भोज्यं च दापयेत्।। ५०।।
जाङ्गलैर्वा रसैर्भोज्यं पिच्छाबस्तिश्च शस्यते।
मधुरैरनुवास्यश्च सिद्धेन क्षीरसर्पिषा।। ५१।।

The patient (suffering from the complications of over-action of emetic and purgation therapies) should take the following recipes :

(1) *Mantha* (demulcent drink) prepared of *añjana* (*dāru-haridrā*), *candana, uśīra,* bone-marrow, blood, sugar and water along with the powder of the roasted paddy.

This is an excellent recipe for curing overaction of elimination therapies;

(2) *Peyā* (thin gruel) prepared of the *śuṅga* (still root) of *vaṭa,* etc. (*nyagrodha, udumbara, aśvattha* and *kapītana*), mixed with honey;

(3) Milk and food articles prepared by boiling with drugs which are *varcas-sāṅgrāhika* or intestinal astringents (vide *Sūtra* 4 : 9, 15);

(4) Food along with the soup of the meat of animals inhabiting arid zone;

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(5) *Picchā-basti* (mucilagenous medicated enema); and

(6) *Anuvāsana-basti* or unctuous enema of *kṣīra-sarpis* (ghee taken out from the milk) cooked with drugs belonging to *Madhura-varga* (group of drugs having sweet taste). [49 - 51]

Treatment of Over-action of Emetic Therapy

वमनस्यातियोगे तु शीताम्बुपरिषेचितः।
पिबेत् कफहरैर्मन्थं सघृतक्षौद्रशर्करम्।। ५२।।
सोद्गारायां भृशं वम्यां मूर्च्छायां धान्यमुस्तयोः।
समधूकाञ्जनं चूर्णं लेहयेन्मधुसंयुतम्।। ५३।।
वमतोऽन्तःप्रविष्टायां जिह्वायां कवलग्रहाः।
स्निग्धाम्ललवणैर्हृद्यैर्यूषक्षीररसैर्हिताः ।। ५४।।
फलान्यम्लानि खादेयुस्तस्य चान्येऽग्रतो नराः।
निःसृतां तु तिलद्राक्षाकल्कलिप्तां , प्रवेशयेत्।। ५५।।
वाग्ग्रहानिलरोगेषु घृतमांसोपसाधिताम्।
यवागूं तनुकां दद्यात् स्नेहस्वेदौ च बुद्धिमान्।। ५६।।

If there is *ati-yoga* (overaction) of the emetic therapy, then the patient should be sprinkled with cold water. He should be given *mantha* (demulcent drink) prepared of *kapha*-alleviating ingredients and added with ghee, honey and sugar.

In the case of excessive vomiting associated with eructation or fainting, the patient should be given to lick the powder of *dhānya, musta, madhūka* and *añjana* (solid extract of *dāru-haridrā*) mixed with honey.

While vomiting, if the tongue gets drawn inside, then *kavala-graha* (recipe used for rinsing the mouth) with the vegetable-soup, milk or meat-soup prepared by adding unctuous, sour, saline and palatable ingredients should be given. Another person may eat sour fruits in front of the patient (to cause salivation of the patient which helps the indrawn tongue to come to its normal position).

If the tongue is protruded out, then it should be smeared

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with the paste of til and *drākṣā,* and pushed back to its normal position.

If there is *vāg-graha* (obstruction in speech) or other disorders caused by *vāyu*, then a wise physician should give thin gruel prepared with ghee and meat to the patient to eat. In addition, the patient may be given oleation and fomentation therapies. [52 - 56]

Need for Regulated Diet

वमितश्च विरिक्तश्च मन्दाग्निश्च विलङ्घितः।
अग्निप्राणविवृद्ध्यर्थं क्रमं पेयादिकं भजेत्।। ५७।।

A person who has *mandāgni* (suppressed power of digestion and metabolism) and who was fasting because of emetic and purgation therapies, should be given regulated diet in the form of *peyā* (thin gruel), etc., for the promotion of his *agni* and *prāṇa* (vitality). [57]

The person who suffers on account of over-action (*ati-yoga*) of emetic and purgation therapies should also be given regulated diet as is prescribed for the person who has undergone therapies appropriately (*sama-yoga*).

Etiology, Signs and Treatment of Ādhmāna

बहुदोषस्य रूक्षस्य हीनाग्नेरल्पमौषधम्।
सोदावर्तस्य चोत्क्लिश्य दोषान्मार्गान्निरुध्य च।। ५८।।
भृशमाध्मापयेन्नाभिं पृष्ठपार्श्वशिरोरुजम्।
श्वासविण्मूत्रवातानां सङ्गं कुर्याच्च दारुणम्।। ५९।।
अभ्यङ्गस्वेदवर्त्यादि सनिरूहानुवासनम्।
उदावर्तहरं सर्वं कर्माध्मातस्य शस्यते।। ६०।।

To a patient who is afflicted with excess of morbid *doṣas*, whose body is ununctuous, who has less of *agni* (power of digestion), and who is suffering from *udāvarta* (upward movement of wind), if medicines for purifications are administered in a small dose, then this, while exciting *doṣas* may cause obstruction to the channels. This causes frequent *ādhmāna* (distension) in the umbilical region, pain in the

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back, sides of the chest as well as head, and serious obstruction to the passage of breath, stool, urine and flatus.

For the treatment of these complications, the patient should be given *abhyaṅga* (massage), *svedana* (fomentation), *varti* (medicated suppository), etc., along with *nirūha* (evacuative) and *anuvāsana* (unctuous) types of enema. All the therapies prescribed for the treatment of *udāvarta* (vide *Cikitsā* 26 : 11-31) are useful for the treatment of the present ailment, i.e. *ādhmāna* (flatulence). [58 - 60]

The adverse effects described above do not necessarily occur as signs of *ati-yoga* and *ayoga*. These are simply the adverse effects arising out of *ati-yoga* and *ayoga* (vide *Sūtra* 15 : 13 and verse no. 29-30 of this chapter) which are as follows :

(1) *Ādhmāna* (abdominal distension);

(2) *Parikartikā* (sawing pain);

(3) *Parisrava* (exudation of liquid);

(4) *Hṛdayopasaraṇa* (migration to cardiac region);

(5) *Aṅga-graha* (stiffness of limbs);

(6) *Jīvādāna* (bleeding);

(7) *Vibhraṃśa* (prolapse : ref. to verse nos. 29-30);

(8) *Stambha* (rigidity);

(9) *Upadrava* (complications); and

(10) *Klama* (mental fatigue).

Etiology, Signs and Treatment of Parikartikā

स्निग्धेन गुरुकोष्ठेन सामे बलवदौषधम्।
क्षामेण मृदुकोष्ठेन श्रान्तेनाल्पबलेन वा।।६१।।
पीतं गत्वा गुदं साममाशु दोषं निरस्य च।
तीव्रशूलं सपिच्छास्रां करोति परिकर्तिकाम्।।६२।।
लङ्घनं पाचनं सामे रूक्षोष्णं लघुभोजनम्।
बृंहणीयो विधिः सर्वः क्षामस्य मधुरस्तथा।।६३।।

If a person who is oleated, who has costive bowel and who is afflicted with *āma* (product of improper digestion and metabolism), or if a person who is weak, who has laxed bowel,

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who is fatigued and who is weak takes a quick-acting medicine for purification, then the recipe reaches the rectum to cause excitation of *doṣas* along with *āma*. This gives rise to excruciating sawing pain accompanied with slimy and bloody discharge.

In this condition associated with *āma,* the patient should keep fast, take *pācana* (digestive stimulants) and food which is ununctuous, hot and light for digestion.

If the patient is weak, then all the nourishing therapies and recipes containing drugs having sweet taste should be taken. [61-63]

The above mentioned complication (*parikartikā* or sawing pain) is stated to occur when the medicine taken for purification reaches the rectum. This, therefore, refers to *parikartikā* caused by the over-action of the purgation, and not emetic therapy. In *Sūtra* 15 : 13, complications arising out of the *ayoga* (under-action) and *ati-yoga* (over-action) are directly described. Though not specifically mentioned in the above text, the complications of emetic therapy can be construed on the line suggested for purgation therapy above.

Some scholars explain this in a different way. According to them, as described in another text (*Suśruta* : *Cikitsā* 34 : 21), *parikartikā* caused by the over-action of purgation therapy is represented by *kaṇṭha-gharṣaṇa* (rubbing of the throat) in the case of emetic therapy; and *adhaḥ-parisrāva* (exudation of liquid through the downward tract) is represented by *kapha-praseka* (excessive salivation) in emetic therapy.

The patient is advised above to keep fast which helps in the cooking of uncooked *āma.*

Recipes for Parikartikā

आमे जीर्णेऽनुबन्धश्चेत् क्षाराम्लं लघु शस्यते।
पुष्पकासीसमिश्रं वा क्षारेण लवणेन वा।। ६४।।
सदाडिमरसं सर्पिः पिबेद्वातेऽधिके सति।
दध्यम्लं भोजने पाने संयुक्तं दाडिमत्वचा।। ६५।।
देवदारुतिलानां वा कल्कमुष्णाम्बुना पिबेत्।
अश्वत्थोदुम्बरप्लक्षकदम्बैर्वा श्रृतं पयः।। ६६।।

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कषायमधुरं शीतं पिच्छाबस्तिमथापि वा।
यष्टीमधुकसिद्धं वा स्नेहबस्तिं प्रदापयेत्।। ६७।।

If *parikartikā* (sawing pain) continues even after the *āma* (product of improper digestion and metabolism) gets cooked, intake of light food added with *kṣārāmla* (a preparation of alkalies and sour ingredients as described in *Cikitsā* 19 : 43) is useful.

If *vāyu* is aggravated then the following recipes (therapies) are useful :

(1) Ghee along with pomegranate-juice added with *puṣpa-kāsīsa* or alkalies or salt;

(2) Food and drinks containing sour curd mixed with the skin of the pomegranate;

(3) Paste of *deva-dāru* and til along with warm water;

(4) Milk boiled by adding *aśvattha, udumbara, plakṣa* and *kadamba*;

(5) *Picchā-basti* (mucilageneous enema) containing astringent, sweet and cooling drugs; and

(6) *Sneha-basti* (unctuous enema) prepared by cooking oil with *yaṣṭi-madhu.* [64 - 67]

Puṣpa-kāsīsa is a variety of *kāsīsa* or Iron sulphate. Some scholars treat this term as a compound of *puṣpa* and *kāsīsa,* and interpret the term '*puṣpa*' as the flower of *dhātakī*, etc., which are constipative.

Etiology, Signs and Treatment of Parisrāva

अल्पं तु बहुदोषस्य दोषमुत्क्लिश्य भेषजम्।
अल्पाल्पं स्रावयेत् कण्डूं शोफं कुष्ठानि गौरवम्।। ६८।।
कुर्याच्चाग्निबलोत्क्लेशस्तैमित्यारुचिपाण्डुताः ।
परिस्रावः स, तं दोषं शमयेद्वामयेदपि।। ६९।।
स्नेहितं वा पुनस्तीक्ष्णं पाययेत विरेचनम्।
शुद्धे चूर्णासवारिष्टान् संस्कृतांश्च प्रदापयेत्।। ७०।।

Purificatory recipe given in a small dose to a person

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having excessively aggravated *doṣas* causes excitation of the morbid matter, and eliminates them frequently in small quantities. This gives rise to itching, oedema, *kuṣṭha* (obstinate skin diseases including leprosy), heaviness of the body, diminution of the power of *agni* (digestion) and strength, *staimitya* (a feeling as if covered with a wet leather), anorexia and anemia. This condition is called *parisrāva*.

This morbidity may be corrected either by alleviation therapy (if there is less of morbid matter) or by emesis (if the morbid material is present in large quantity).

After oleation, the patient may be given strong purgation therapy again. After purification, the patient should be given recipes of powders, *āsavas* and *ariṣṭas* processed with appropriate ingredients (as described in the treatment of *arśas* or piles and *grahaṇī* or sprue syndrome (vide *Cikitsā* 14 & 15). [68-70]

Etiology, Signs and Treatment of Hṛdayopasaraṇa

पीतौषधस्य वेगानां निग्रहान्मारुतादयः।
कुपिता हृदयं गत्वा घोरं कुर्वन्ति हृद्ग्रहम्।। ७१।।
स हिक्काकासपार्श्वार्तिदैन्यलालाक्षिविभ्रमैः।
जिह्वां खादति निःसंज्ञो दन्तान् किटिकिटापयन्।। ७२।।
न गच्छेद्विभ्रमं तत्र वामयेदाशु तं भिषक्।
मधुरैः पित्तमूर्च्छार्तं कटुभिः कफमूर्च्छितम्।। ७३।।
पाचनीयैस्ततश्चास्य दोषशेषं विपाचयेत्।
कायाग्निं च बलं चास्य क्रमेणोत्थापयेत्ततः।। ७४।।
पवनेनातिवमतो हृदयं यस्य पीड्यते।
तस्मै स्निग्धाम्ललवणं दद्यात् पित्तकफेऽन्यथा।। ७५।।

Because of the suppression of the manifested natural urges in a person who has taken purificatory recipe, *vāyu*, etc., get aggravated. Reaching the heart, these aggravated *doṣas* give rise to serious ailments like *hṛd-graha* (cardiac spasm).

The patient afflicted with this condition suffers from

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hiccup, cough, pain in the sides of the chest, prostration, ptyalism and agitation of the eyes. He bites his tongue, becomes unconscious and gnashes his teeth.

The physician should not commit a mistake, and should administer emetic therapy to the patient immediately.

If the patient faints because of aggravated *pitta*, then the emetic therapy should be given with sweet ingredients. If the patient faints because of aggravated *kapha,* then the emetic therapy should be given with pungent ingredients. Thereafter, the residual *doṣas* should be got digested by the administration of digestive stimulants after which his *kāyāgni* (digestive power) and strength should be restored gradually.

Because of vomiting in excess, if the heart is afflicted by aggravated *vāyu,* then the patient should be given unctuous, sour and saline drugs. If this is caused by *pitta* or *kapha*, then drugs having opposite attributes (like ununctuousness and bitter as well as pungent tastes) should be given. [71-75]

If there is spasm of the heart (*hṛd-graha*), then the physician should not misunderstand the patient as dead. Giving emetic therapy as described in the above text to a fainted patient is difficult. This emetic therapy is therefore, indicated for the beginning stage of fainting (when the patient is partially conscious). If the patient has already fainted (fully), then the emetic therapy may be given by inserting the finger smeared with emetic recipes (into the root of the tongue of the patient).

Etiology, Signs and Treatment of Aṅga-graha

पीतौषधस्य वेगानां निग्रहेण कफेन वा।
रुद्धोऽति वा विशुद्धस्य गृह्णात्यङ्गानि मारुतः।। ७६।।
स्तम्भवेपथुनिस्तोदसादोद्वेष्टनमन्थनैः ।
तत्र वातहरं सर्वं स्नेहस्वेदादि कारयेत्।। ७७।।

If a person who has taken purificatory therapy, suppresses his manifested natural urges, or if the *vāyu* in his body gets occluded by *kapha*, or if the purification is done in excess, then the aggravated *vāyu* causes spasm in different parts of the body of the patient. This produces *stambha* (stiffness), *vepathu*

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(trembling), *nistoda* (pain), *sāda* (prostration), *udveṣṭana* (spasm) and *manthana* (twisting).

For these ailments, all the *vāyu*-alleviating therapies like oleation and fomentation should be administered. [76-77]

These complications arise because of both *ayoga* (under-action) and *ati-yoga* (over-action).

Etiology, Signs and Treatment of Jīvādāna (Bleeding)

अतितीक्ष्णं मृदौ कोष्ठे लघुदोषस्य भेषजम्।
दोषान् हृत्वा विनिर्मथ्य जीवं हरति शोणितम्।। ७८।।
तेनान्नं मिश्रितं दद्याद्वायसाय शुनेऽपि वा।
भुङ्क्ते तच्चेद्वदेज्जीवं न भुङ्क्ते पित्तमादिशेत्।। ७९।।
शुक्लं वा भावितं वस्त्रमावानं कोष्णवारिणा।
प्रक्षालितं विवर्णं स्यात् पित्ते शुद्धं तु शोणिते।। ८०।।
तृष्णामूर्च्छामदार्तस्य कुर्यादामरणात् क्रियाम्।
तस्य पित्तहरीं सर्वामतियोगे च या हिता।। ८१।।
मृगगोमहिषाजानां सद्यस्कं जीवतामसृक्।
पिबेज्जीवाभिसन्धानं जीवं तद्ध्याशु गच्छति।। ८२।।
तदेव दर्भमृदितं रक्तं बस्तिं प्रदापयेत्।
श्यामाकाश्मर्यबदरीदूर्वोशीरैः शृतं पयः।। ८३।।
घृतमण्डाञ्जनयुतं शीतं बस्तिं प्रदापयेत्।
पिच्छाबस्तिं सुशीतं वा घृतमण्डानुवासनम्।। ८४।।

If a strong purificatory recipe is given to a person who has laxed bowel, and who has less of morbid *doṣas*, then after eliminating the morbid *doṣas*, the recipe causes churning (of the intestine) which results in bleeding.

This (fluid) should be mixed with food and given to crows and dogs to eat. If they eat it, then it is to be treated as *jīva-rakta* (live or pure blood), and if it is not eaten by them, it should be treated as bleeding from different parts of the body), i.e. polluted blood.

A piece of white cloth should be impregnated with this fluid and then dried. When washed with luke-warm water, if

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the piece of cloth becomes discoloured, then the bleeding is to be treated as caused by *rakta-pitta,* and if it becomes absolutely clean, then this is to be treated as *jīva-rakta* (live or pure blood).

If the patient having bleeding suffers from morbid thirst, fainting and intoxication, then the physician should treat him till the last moment of his life. All the therapies which are meant for the alleviation of *pitta,* and which are useful for the management of over-action of purificatory therapies (as described in the verse no. 47) should be given to him.

He should be given to drink the fresh blood of a living deer, cow, buffalo or goat which is life-supporting because it immediately gets transformed into the live-blood. This blood [of animals] may be mixed with the powder of *darbha* and used for *basti* (medicated enema).

The milk cooked by adding *śyāmā* (*priyaṅgu*), *kāśmarya, badarī, dūrvā* and *uśīra* should be mixed with *ghṛta-maṇḍa* (supernatant part of ghee) and *añjana* (solid extract of *dāru-haridrā*), and cooled. This may be administered as *basti* (medicated enema). He may be given very cold *picchā-basti* (mucilagenous enema) or *anuvāsana-basti* (unctuous enema) prepared of *ghṛta-maṇḍa.* [78-84]

Blood coming out of the gastro-intestinal tract may be of two types, viz., *jīva-śoṇita* or live-blood which is one of the tissue elements, and the (polluted) blood which comes out because of the disease *rakta-pitta.* Methods described above are to ascertain the exact nature of the blood, because in two conditions, two different types of treatment are to be employed. For bleeding because of the disease *rakta-pitta,* therapies for this particular disease are to be administered. If there is live-blood coming out of the gastro-intestinal tract, then the treatment described in the verse nos. 81-84 is useful.

The fresh blood of living animals, because of its specific action (*prabhāva*), gets transformed into the blood of the patient quickly.

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Etiology, Signs and Treatment of Vibhraṃśa

गुदं भ्रष्टं कषायैश्च स्तम्भयित्वा प्रवेशयेत्।
सामत्गान्धर्वशब्दांश्च संज्ञानाशेऽस्य कारयेत्।। ८५।।
यदा विरेचनं पीतं विडन्तमवतिष्ठते।
वमनं भेषजान्तं वा दोषानुत्क्लिश्य नावहेत्।। ८६।।
तदा कुर्वन्ति कण्ड्वादीन् दोषाः प्रकुपिता गदान्।
स विभ्रंशो मतस्तत्र स्याद्यथाव्याधि भेषजम्।। ८७।।

If there is prolapse of the rectum (*guda-bhraṃśa*), it should be made stiff by applying astringent drugs, and pushed into its own location.

If there is less of consciousness (*sañjña-bhraṃśa*), then the patient should be consoled and he should be entertained with soothing music.

If the intake of purgative recipe stops action after the elimination of stool, and if the intake of emetic recipe stops action after the elimination of medicine as a result of which the excited *doṣas* do not get eliminated, then the aggravated *doṣas* give rise to ailments, viz., *kaṇḍū* (itching), etc. This is called *vibhraṃśa* (wrong action). These ailments are to be appropriately treated according to their nature. [85-87]

Three different types of *vibhraṃśa* are described above. The first two types are caused by *ati-yoga* (over-action), and the last type is caused by *ayoga* (under-action) of the therapy.

The term '*vibhraṃśa*' used in the above text is of technical nature (*pāribhāṣikī*).

Etiology, Signs and Treatment of Stambha

पीतं स्निग्धेन सस्नेहं तद्दोषैर्मार्दवाद्वृतम्।
न वाहयति दोषांस्तु स्वस्थानात् स्तम्भयेच्युतान्।। ८८।।
वातसङ्गगुदस्तम्भशूलैः क्षरति चाल्पशः।
तीक्ष्णं बस्तिं विरेकं वा सोऽर्हो लङ्घितपाचितः।। ८९।।

Unctuous type of purificatory recipe taken by an oleated person gets occluded by *doṣas* because of its mild nature. It

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becomes incapable of expelling the *doṣas*. The *doṣas* displaced from their locations thus get obstructed. Associated with the obstruction to the voiding of flatus and stiffness as well as colic pain in the anus these morbid *doṣas* get eliminated only in small quantities. Such a patient should be treated by strong enema or purgation therapy after he is given *laṅghana* (fasting therapy) and *pācana* (carminative therapy). [88-89]

Etiology, Signs and Treatment of Upadravas

रूक्षं विरेचनं पीतं रूक्षेणाल्पबलेन वा।
मारुतं कोपयित्वाऽऽशु कुर्याद्घोरानुपद्रवान्।। ९०।।
स्तम्भशूलानि घोराणि सर्वगात्रेषु मुह्यतः।
स्नेहस्वेदादिकस्तत्र कार्यो वातहरो विधिः।। ९१।।

Intake of ununctuous type of purgation therapy by a person whose body is ununctuous and who is weak, aggravates *vāyu* immediately to cause serious type of complications like serious type of *stambha* (stiffness) and colic pain all over the body of the patient who gradually loses consciousness.

In such cases, oleation, fomentation and such other therapies for the alleviation of *vāyu* should be administered. [90-91]

Ādhmāna, etc., described earlier are no doubt, complications. But colic pain, etc., described in the above text are specifically designated as complications here. Though *śūla* (colic pain), etc., are independent diseases, these are designated here as complciations because these are manifested at a later stage (vide *Sūtra* 5 : 38-39).

Alternatively, since complications arise at a later stage of the disease, *ayoga* (underaction) may be treated as a disease entity, and *śūla*, etc., which are manifested later may be trated as complications.

Etiology, Signs and Treatment of Klama

स्निग्धस्य मृदुकोष्ठस्य मृदूत्क्लिश्यौषधं कफम्।
पित्तं वातं च संरुध्य सतन्द्रागौरवं क्लमम्।। ९२।।
दौर्बल्यं चाङ्गसादं च कुर्यादाशु तदुल्लिखेत्।
लङ्घनं पाचनं चात्र स्निग्धं तीक्ष्णं च शोधनम्।। ९३।।

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Mild purificatory recipe administered to an oleated person having laxed bowel excites *kapha* and *pitta* because of which the *vāyu* gets obstructed leading to the manifestation of *klama* (mental fatigue) associated with drowsiness and heaviness. This causes weakness and prostration of limbs.

Such a patient should be administered emetic therapy quickly. *Laṅghana* (fasting) and *pācana* (carminative drugs) should be given to the patient followed by purificatory therapy containing unctuous and sharp drugs. [92-93]

Epilogue

तत्र श्लोकौ–

इत्येता व्यापदः प्रोक्ताः सरूपाः सचिकित्सिताः।
वमनस्य विरेकस्य कृतस्याकुशलैर्नृणाम्।। ९४।।
एता विज्ञाय मतिमानवस्थाश्चैव तत्त्वतः।
दद्यात् संशोधनं सम्यगारोग्यार्थी नृणां सदा।। ९५।।

To sum up :

The complications along with signs, symptoms and treatment arising out of the administration of emetic and purgation therapies by the unskilled physician are described in this chapter. A wise physician having correct knowledge of these states (complications), should appropriately administer purificatory therapies (free from complications) with the objective of providing good health to the people. [94-95]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढबलसंपूरिते सिद्धिस्थाने वमनविरेचनव्यापत्सिद्धिर्नाम षष्ठोऽध्यायः।। ६।।

Thus, ends the sixth chapter of *Siddhi-sthāna* dealing with "Successful Treatment of the Complications of Emetic and Purgation Therapies" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - VII

सप्तमोऽध्यायः

(COMPLICATIONS OF ENEMA THERAPY AND THEIR TREATMENT)

Prologue

अथातो बस्तिव्यापत्सिद्धिं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

Now we shall expound the chapter on the "Successful Treatment of Complications Arising out of the Administration of *Basti* (Medicated Enema) Therapy".

Thus, said Lord Ātreya. [1 - 2]

In the previous chapter, the treatment of the complications arising out of emetic and purgation therapies were described. Next follows *basti* or medicated enema therapy in the order of sequence. Because of this, the treatment of complications arising out of this *basti* therapy is being discussed in this chapter.

Basti or medicated enema therapy is of two types, viz., *nirūha-basti* or evacuative enema and *anuvāsana-basti* or unctuous enema. Of these, the complications arising out of *nirūha-basti* are described here.

Dialogue and Topics to be Discussed

धीधैर्यौदार्यगाम्भीर्यक्षमादमतपोनिधिम् ।
पुनर्वसुं शिष्यगणः पप्रच्छ विनयान्वितः।।३।।
काः कति व्यापदो बस्तेः किंसमुत्थानलक्षणाः।
का चिकित्सा इति प्रश्नाञ्छ्रुत्वा तानब्रवीद्गुरुः।।४।।

Punarvasu, the veritable store-house of *dhī* (wisdom), *dhairya* (fortitude), *audārya* (large-heartedness), *gāmbhīrya* (profundity), *kṣamā* (forgiveness), *dama* (self control) and *tapas* (penance) was asked with humility by the group of disciples about the following topics :

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(1) Which complications arise out of the administration of *basti*?

(2) What is the number of these complications ?

(3) What are their causes ?

(4) What are their signs and symptoms ? and

(5) What is the treatment of these complications ?

Having heard these questions, the Teacher said as follows [to be discussed in the subsequent verses]. [3-4]

Complications, Their Number and Etiology in General

नातियोगौ क्लमाध्माने हिक्का हृत्प्राप्तिरूर्ध्वता।
प्रवाहिका शिरोङ्गार्तिः परिकर्तः परिस्रवः।।५।।
द्वादश व्यापदो बस्तेरसम्यग्योगसंभवाः।
आसामेकैकशो रूपं चिकित्सां च निबोधत।।६।।

Twelve complications arising out of the improper administration (*asamyag-yoga*) of *basti* or enema are as follows :

(1) *Ayoga* (underaction or absence of any action);

(2) *Ati-yoga* (over-action);

(3) *Klama* (mental fatigue);

(4) *Ādhmāna* (flatulence);

(5) *Hikkā* (hiccup);

(6) *Hṛt-prāpti* (cardiac disorders);

(7) *Ūrdhvatā* (excessive upward movement);

(8) *Pravāhikā* (gripping pain);

(9) *Śiro-arti* (headache);

(10) *Aṅga-arti* (bodyache);

(11) *Parikartikā* (sawing pain); and

(12) *Parisrava* (excessive discharge).

Signs (including etiology) and treatment of each one of

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them will be described thereafter which you may hear (addressed to Agniveśa). [5-6]

The term '*asamyag-yoga*' or improper use implies *ayoga* (under-action), *ati-yoga* (overaction) and *mithyā-yoga* (wrong action). These are the general etiological factors described as answer to the query no. 3 described in the verse no. 4 above. The specific causative factors of each one of these adverse effects will be described later in this chapter.

Inappropriate use (*asamyag-yoga*) of *nirūha* includes both *ayoga* and *ati-yoga*. Even though caused by *ayoga* and *ati-yoga*, *klama*, etc., are described here separately because they have specific causative factors, signs and treatment. Because of this, *ādhmāna* (flatulence), etc., though caused by *ayoga* and *ati-yoga* of emetic and purgation therapies, were described separately in the previous chapter.

Some scholars follow a different reading of the above text. In the place of "*nātiyogau klamādhmāne*", the variant reading is "*nātiyogāt klamādhmāne*", and in the place of "*dvādaśa-vyāpado basteḥ*" the variant reading is "*daśaitā vyāpado basteḥ*". Thus, excluding *ayoga* and *ati-yoga*, they enumerate only ten adverse effects. *Ayoga* and *ati-yoga*, according to these variant readings are the causative factors of the ten adverse effects. In respect of the emetic and purgation therapies in the previous chapter, only ten adverse effects were described. If the aforesaid variant readings are to be taken as authentic, then these are to be interpreted on the line followed in the previous chapter. However, the reading in the text is faultless.

Etiology, Signs and Treatment of Ayoga

गुरुकोष्ठेऽनिलप्राये रूक्षे वातोल्वणेऽपि वा।
शीतोऽल्पलवणस्नेहद्रवमात्रो घनोऽपि वा।।७।।
बस्तिः संक्षोभ्य तं दोषं दुर्बलत्वादनिर्हरन्।
करोति गुरुकोष्ठत्वं वातमूत्रशकृद्ग्रहम्।।८।।
नाभिबस्तिरुजं दाहं हृल्लेपं श्वयथुं गुदे।
कण्डूगण्डानि वैवर्ण्यमरुचिं वह्निमार्दवम्।।९।।
तत्रोष्णायाः प्रमथ्यायाः पानं स्वेदाः पृथग्विधाः।
फलवर्त्योऽथवा कालं ज्ञात्वा शस्तं विरेचनम्।।१०।।
बिल्वमूलत्रिवृद्दारुयवकोलकुलत्थवान् ।
सुरादिमूत्रवान् बस्तिः सप्राक्पेष्यस्तमानयेत्।।११।।

The enema, while exciting the morbid matter does not

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help in their elimiantion because of its weak action as a result of the following :

(1) If the patient is of costive bowel;

(2) If the colon of the patient is dominated by *vāyu*;

(3) If the body of the patient is ununctuous;

(4) If there is aggravation of *vāyu* in the body;

(5) If the enema recipe is cold;

(6) If the recipe of enema contains less of salt, unctuous material and liquid;

(7) If the enema recipe is of small dose; and

(8) If the enema recipe is dense.

As a result of these factors, the patient suffers from the followin.

(1) Heaviness in the gastro-intestinal tract;

(2) Retention of flatus, urine and stool;

(3) Pain in the umbilical region and urinary bladder;

(4) Burning sensation;

(5) *Hṛllepa* (a feeling as if the heart is adhered with sticky material);

(6) Oedema in the recturm;

(7) Itching and *gaṇḍa* (abscesses);

(8) Discoloration of the skin;

(9) Anorexia; and

(10) Suppression of the power of digestion.

The above mentioned ailments can be treated with the following therapeutic measures :

(1) Intake of hot *pramathyā* (warm digestive decoctions which are described in the treatment of diarrhoea- vide *Cikitsā* 19 : 20-21);

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(2) Administration of different types of fomentation therapy;

(3) Administration of *phala-varti* (medicated suppository);

(4) Administration of purgation therapy in appropriate time; and

(5) Administration of enema recipe prepared of the root of *bilva, trivṛt, deva-dāru, yava, kola, kulattha, surā,* etc. (*sauvīraka, tuṣodaka,* etc.,) and cow's urine by adding the paste of drugs described earlier, (viz., *balā,* etc., described in *Siddhi* 3 : 13).[7-11]

Etiology, Signs and Treatment of Ati-yoga

स्निग्धस्विन्नेऽतितीक्ष्णोष्णो मृदुकोष्ठेऽतियुज्यते।
तस्य लिङ्गं चिकित्सा च शोधनाभ्यां समा भवेत्।।१२।।
पृश्निपर्णीं स्थिरां पद्मं काश्मर्यं मधुकं बलाम्।
पिष्ट्वा द्राक्षां मधूकं च क्षीरे तण्डुलधावने।।१३।।
द्राक्षायाः पक्वलोष्टस्य प्रसादे मधुकस्य च।
विनीय सघृतं बस्तिं दद्याद्दाहेऽतियोगजे।।१४।।

Ati-yoga (overaction) is caused by the administration of excessively sharp and hot recipe as enema to a person who is oleated and fomented, and who has laxed bowel. The signs and treatment are similar to those prescribed for the treatment of *ati-yoga* (overaction) of emetic and purgation therapies.

The recipe for *basti* should be prepared by adding the paste of *pṛśni-parṇī, sthirā, padma, kāśmarya, madhuka, balā, drākṣā* and *madhūka* to milk, rice-water (*taṇḍulodaka*) and *śīta-kaṣāya* (cold infusion) of *drākṣā,* baked earth and *madhuka.* Administration of this recipe by adding ghee as *basti,* cures *dāha* (burning sensation) caused by *ati-yoga* (overaction) of *nirūha.* [12-14]

Etiology, Signs and Treatment of Klama

आमशेषे निरूहेण मृदुना दोष ईरितः।

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मार्गं रुणद्धि वातस्य हन्त्यग्निं मूर्च्छयत्यपि।। १५।।
क्लमं विदाहं हृच्छूलं मोहवेष्टनगौरवम्।
कुर्यात् स्वेदैर्विरूक्षैस्तं पाचनैश्चाप्युपाचरेत्।। १६।।
पिप्पलीकत्तृणोशीरदारुमूर्वाश्रृतं जलम्।
पिबेत् सौवर्चलोन्मिश्रं दीपनं हृद्विशोधनम्।। १७।।
वचानागरशटचेला दधिमण्डेन मूर्च्छिताः।
पेयाः प्रसन्नया वा स्युररिष्टेनासवेन वा।। १८।।
दारु त्रिकटुकं पथ्यां पलाशं चित्रकं शटीम्।
पिष्ट्वा कुष्ठं च मूत्रेण पिबेत् क्षारांश्च दीपनान्।। १९।।
बस्तिमस्य विदध्याच्च समूत्रं दाशमूलिकम्।
समूत्रमथवा व्यक्तलवणं माधुतैलिकम्।। २०।।

If a mild recipe is used for *nirūha-basti,* when there is residual *āma* (product of improper digestion) in the gastro-intestinal tract, then the *doṣas* (*pitta* and *kapha* along with *āma*) excited by enema obstruct the channel of *vāyu* that causes perversion and suppression of the power of digestion, further aggravation of *vāyu, klama* (mental fatigue), burning sensation, cardiac pain, stupefaction, cramps and heaviness.

Such a patient should be treated by fomentation with ununctuous ingredients, and *pācana* (carminatives).

The patient should drink water boiled with *pippalī, kattṛṇa, uśīra, deva-dāru* and *mūrvā* by adding *sauvarcala*-salt which stimulates the power of digestion and cleanses the heart.

The powder of *vacā, nāgara, śaṭī* and *elā* should be added with whey. This recipe should be taken along with *prasannā, ariṣṭa* or *āsava* (types of alcoholic preparations).

The patient should take the paste of *deva-dāru, śuṇṭhī, pippalī, marica, pathyā, palāśa, citraka, śaṭī* and *kuṣṭha* along with cow's urine.

He may also take alkali preparations which are digestive stimulants (described in *Cikitsā* 15 : 168-193).

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He should be given *basti* prepared of *bilva, śyonāka, gambhārī, pāṭalā, gaṇi-kārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura* along with cow's urine. [The enema recipe containing this *daśa-mūla* is described in *Siddhi* 3 : 35-36.]

Alternatively, he may also take *Mādhu-tailika* type of medicated enema (to be described later in *Siddhi* 12 : 18 : 13) added with cow's urine and adequate quantity of salt.[15-20]

Etiology, Signs and Treatment of Ādhmāna

अल्पवीर्यो महादोषे रूक्षे क्रूराशये कृतः।
बस्तिर्दोषावृतो रुद्धमार्गो रुन्ध्यात् समीरणम्।। २१।।
स विमार्गोऽनिलः कुर्यादाध्मानं मर्मपीडनम्।
विदाहं गुरुकोष्ठस्य मुष्कवङ्क्षणवेदनाम्।। २२।।
रुणद्धि हृदयं शूलैरितश्चेतश्च धावति।
श्यामाफलादिभिः कुष्ठकृष्णालवणसर्षपैः।। २३।।
धूममाषवचाकिण्वक्षारचूर्णगुडैः कृताम्।
कराङ्गुष्ठनिभां वर्तिं यवमध्यां निधापयेत्।। २४।।
अभ्यक्तस्विन्नगात्रस्य तैलाक्तां स्नेहिते गुदे।
अथवा लवणागारधूमसिद्धार्थकैः कृताम्।। २५।।
बिल्वादिना निरूहः स्यात् पीलुसर्षपमूत्रवान्।
सरलामरदारुभ्यां सिद्धं चैवानुवासनम्।। २६।।

If enema of mild potency is given to a person who has excessively aggravated *doṣas*, whose body is ununctuous and who has costive bowel, then it gets occluded by *doṣas*, and gets clogged in the channel thereby causing obstruction to the movement of *vāyu*. This *vāyu* then moves through a diverted path causing thereby exceedingly painful *ādhmāna* (flatulence), *vidāha* (burning sensation), *guru-koṣṭhatā* (heaviness of the gastro-intestinal tract) and pain in the testicles as well as groins. It causes impediment in the functioning of the heart by causing cardiac pain, and moves about irregularly in different directions.

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A *varti* (medicated suppository) of the size of thumb, and shape of barley-seed should be prepared of *śyāmā,* etc., (nine drugs, viz., *śyāmā, trivṛt, caturaṅgula, tilvaka, mahā-vṛkṣa, saptalā, śaṅkhinī, dantī* and *dravantī* -- vide *Kalpa* 1 : 6), *phala,* etc., (six drugs, viz., *phala, jīmūtaka, ikṣvāku, dhāmārgava, kuṭaja* and *kṛta-vedhana* -- vide *Kalpa* 1 : 6), *kuṣṭha, kṛṣṇā* (*pippalī*), salt, *sarṣapa,* powder of *dhūma* (kitchen soot), *māṣa, vacā, kiṇva* (yeast) and *kṣāra* (alkali), and jaggery.

Alternatively, this *varti* (suppository) can be prepared by adding salt, kitchen-soot and *siddhārthaka* (to *śyāmā*, etc., and *phala*, etc., described above).

These suppositories may be smeared with oil and inserted into the lubricated anus of the patient who is previously given massage and fomentation therapies.

The patient may be given *nirūha* with a recipe containing *bilva,* etc., (vide verse no. 11), and added with *pīlu, sarṣapa* and cow's urine.

Oil cooked with *saralā* and *deva-dāru* may be used for giving *anuvāsana-basti* or unctuous type of enema to the pátient. [21 - 26]

In the first recipe, adequate quantity of jaggery should be added so that the recipe could be of the suitable consistency to take the size and shape of a *varti.* In the second recipe of *varti*, jaggery should also be added.

Etiology, Signs and Treatment of Hikkā

मृदुकोष्ठेऽबले बस्तिरतितीक्ष्णोऽतिनिर्हरन्।
कुर्याद्धिक्कां, हितं तस्मै हिक्काघ्नं बृंहणं च यत्।। २७।।
बलास्थिरादिकाश्मर्यत्रिफलागुडसैन्धवैः ।
सप्रसन्नारनालाम्लैस्तैलं पक्त्वाऽनुवासयेत्।। २८।।
कृष्णालवणयोरक्षं पिबेदुष्णाम्बुना युतम्।
धूमलेहरसक्षीरस्वेदाश्चान्नं च वातनुत्।। २९।।

If a very strong recipe of *basti* is administered to a person

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having laxed bowel and weakness, then it causes elimination of morbid matter in excess quantity as a result of which the patient suffers from *hikkā* (hiccup).

For such a patient, therapies curative of *hikkā* or hiccup (as described in *Cikitsā* 17), and nourshing therapies are useful.

He should be given *anuvāsana-basti* or unctuous type of medicated enema with oil cooked by adding *balā, sthirā,* etc., *kāśmarya, harītakī, bibhītaka, āmalakī, guḍa, saiṇḍhava, prasannā* and sour *āranāla.*

The patient may take one *akṣa* (*tolā*) of the powder of *kṛṣṇā* (*pippalī*) and rock-salt along with hot water.

He should be given *vāyu*-alleviating *dhūma* (smoking therapy), linctus, meat-soup, medicated milk, fomentation therapy and suitable food. [27-29]

Anuvāsana-basti or unctuous type of enema is prohibited for a patient suffering from hiccup (vide *Siddhi* 2 : 14 & 17). Even then, because of the specific nature of this *hikkā, anuvāsana-basti* therapy is indicated for its treatment in the above text.

Etiology, Signs and Treatment of Hṛt-prāpti

अतितीक्ष्णः सवातो वा न वा सम्यक् प्रपीडितः।
घट्टयेद्धृदयं बस्तिस्तत्र काशकुशेत्कटैः।। ३०।।
स्यात् साम्ललवणस्कन्धकरीरबदरीफलैः ।
शृतैर्बस्तिर्हितः सिद्धं वातघ्नैश्चानुवासनम्।। ३१।।

If the enema recipe is of exceedingly strong nature, if the enema fluid is injected along with air, or if appropriate pressure is not applied over the receptacle of enema-fluid during administration, then this afflicts the heart.

In this case the decoction of *kāśa, kuśa, itkaṭa,* drugs belonging to *amla* (sour) and *lavaṇa* (saline) *skandha* (group), *karīra* and fruit of *badarī* should be used for enema (*nirūha*). The patient may also be given *anuvāsana* or unctuous type of enema prepared of *vāyu*-alleviating drugs (like *daśa-mūla*). [30-31]

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Drugs belonging to *amla* and *lavaṇa-skandha* are described in *Vimāna* 8 : 140-141.

Etiology, Signs and Treatment of Ūrdhva-gamana (Upward Movement)

वातमूत्रपुरीषाणां दत्ते वेगान्निगृह्णतः।
अति वा पीडितो बस्तिर्मुखेनायाति वेगवान्।। ३२।।
मूर्च्छाविकारं तस्यादौ दृष्ट्वा शीताम्बुना मुखम्।
सिञ्चेत् पार्श्वोदरं चाधः प्रमृज्याद्वीजयेच्च तम्।। ३३।।
केशेष्वालम्ब्य चाकाशे धुनुयात्त्रासयेच्च तम्।
गोखराश्वगजैः सिंहै राजप्रेष्यैस्तथोरगैः।। ३४।।
उल्काभिरेवमन्यैश्च भीतस्याधः प्रवर्तते।
वस्त्रपाणिग्रहैः कण्ठं रुन्ध्यान्न म्रियते यथा।। ३५।।
प्राणोदाननिरोधाद्धि प्रसिद्धतरमार्गवान्।
अपानः पवनो बस्तिं तमाश्वेवापकर्षति।। ३६।।
ततः क्रमुककल्काक्षं पाययेताम्लसंयुतम्।
औष्ण्यात्तैक्ष्ण्यात् सरत्वाच्च बस्तिं सोऽस्यानुलोमयेत्।। ३७।।
पक्वाशयस्थिते स्विन्ने निरूहो दाशमूलिकः।
यवकोलकुलत्थैश्च विधेयो मूत्रसाधितः।। ३८।।
बिल्वादिपञ्चमूलेन सिद्धो बस्तिरुरःस्थिते।
शिरःस्थे नावनं धूमः प्रच्छाद्यं सर्षपैः शिरः।। ३९।।

If after the administration of enema the patient suppresses the natural urges for voiding flatus, urine and stool, and if excessive pressure is applied over the enema-receptacle during the administration of this therapy, then because of forceful flow the enema-fluid comes out through the oral cavity.

If on account of this, there is fainting, the following remedial measures should be undertaken :

(1) In the beginning the face of the patient should be sprinkled with cold water;

(2) His sides of the chest and abdomen should be squeezed downwards;

(3) He should be fanned;

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(4) He should be pulled up to the mid-air by holding his hair, and shaken;

(5) He should be frightened by means of infuriated bull, ass, horse, elephant, lion, executioners of the king, serpents, fire-works and such other fearful objects. Being terrified in this manner, the enema-fluid will start flowing downwards;

(6) The throat of the patient should be squeezed with the help of a piece of cloth or by hand taking care not to asphyxiate the patient which may otherwise lead to his death. By the obstruction to the path of *prāṇa* and *udāna* caused in the above manner, the *apāna-vāyu* becomes predominant in the passage, and instantaneously draws the fluid downwards to the normal course;

(7) Thereafter, one *akṣa* (*tolā*) of the paste of *kramuka* (*pūga-phala*) added with sour juice should be given to the patient to drink. Because of hot (*uṣṇa*), sharp (*tīkṣṇa*) and mobile (*sara*) attributes, the recipe helps in the downward movement (*anulomana*) of the enema-fluid;

(8) If the enema-fluid is located in the *pakvāśaya* (colon), then the patient should be given fomentation therapy, and thereafter, *nirūha* type of enema should be given with a recipe containing *daśa-mūla* (*bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*), *yava, kola* and *kulattha* cooked by adding cow's urine;

(9) If the enema-fluid is located in the chest region, then *nirūha-basti* prepared by cooking with *pañca-mūla* (*bilva, śyonāka, gambhārī, pāṭalā* and *gaṇi-kārikā*) should be administered; and

(10) If the enema-fluid gets located in the head (upper

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part of the body), then the patient should be given *nāvana* (inhalation therapy) and *dhūma* (smoking therapy) after anointing his head with the mustard paste. [32-39]

Etiology, Signs and Treatment of Pravāhikā (Gripping Pain)

स्निग्धस्विन्ने महादोषे बस्तिर्मृद्वल्पभेषजः।
उत्क्लिश्यात्यं हरेद्दोषं जनयेच्च प्रवाहिकाम्।। ४०।।
स बस्तिपायुशोफेन जङ्घोरुसदनेन वा।
निरुद्धमारुतो जन्तुरभीक्ष्णं संप्रवाहते।। ४१।।
स्वेदाभ्यङ्गान्निरूहांश्च शोधनीयानुलोमिकान्।
विदध्याल्लङ्घयित्वा तु वृत्तिं कुर्याद्विरिक्तवत्।। ४२।।

If a mild recipe of enema is administered in a small dose to a patient who is oleated and fomented, and whose body is afflicted with excessively aggravated *doṣas*, then after excitation, this enema eliminates morbid material (*doṣas*) only in small quantities causing thereby *pravāhikā* (gripping pain).

The patient having obstructed *vāyu* passes stool frequently because of the inflammation of the bladder (*basti*) and anus, and asthenia of calf regions as well as thighs.

In such cases, after fasting, the patient should be given fomentation, massage and *nirūha* type of enema with recipes containing drugs which are *śodhanīya* or purificatory (like *trivṛt*, etc.), and *anulomanīya* or inducing downward movement of *vāyu* (like milk, sugar-cane juice) in nature. He should resort to regimens as prescribed for a person who has undergone purgation therapy. [40-42]

Etiology, Signs and Treatment of Śirorti (Headache)

दुर्बले क्रूरकोष्ठे च तीव्रदोषे तनुर्मृदुः।
शीतोऽल्पश्चावृतो दोषैर्बस्तिस्तद्विहतोऽनिलः।। ४३।।
मार्गैर्गात्राणि सन्धावन्नूर्ध्वं मूर्ध्नि विहन्यते।
ग्रीवां मन्ये च गृह्णाति शिरः कण्ठं भिनत्ति च।। ४४।।

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बाधिर्यं कर्णनादं च पीनसं नेत्रविभ्रमम्।
कुर्यादभ्यञ्जनं तैललवणेन यथाविधि।। ४५।।
युञ्ज्यात् प्रधमनैर्नस्यैर्धूमैरस्य विरेचयेत्।
तीक्ष्णानुलोमिकेनाथ स्निग्धं भुक्तेऽनुवासयेत्।। ४६।।

If the enema recipe which is thin, mild and cooling is administered in a small dose to a patient who is weak, who has costive bowel and who is afflicted with exceedingly aggravated *doṣas,* then the enema-fluid gets occluded by *doṣas*. The *vāyu,* thus pressed moves fast through the channels to different parts of the body, causes stiffness of the neck and temples and gets stuck up in the head and throat, causing deafness, tinitus, coryza and agitation of the eyes.

The patient should be given following therapies :

(1) Massage with oil mixed with salt in appropriate manner;

(2) Elimination of *doṣas* by *pradhamana-nasya* (inhalation therapy given by blowing drugs into the nostrils) and *dhūma* (smoking therapy); and

(3) The patient should be oleated, and after food, he should be given *anuvāsana* therapy the recipe for which is to be prepared with drugs which are *tīkṣṇa* (sharp) and *ānulomika* (causing downward movement of *vāyu*). [43-46]

The term "*tīkṣṇānulomikena*" in the text may also be interpreted as qualifying the food. In that case, the patient should be given *anuvāsana* type of medicated enema after the patient has taken food, ingredients of which are *tīkṣṇa* (sharp) and *ānulomika* in nature.

Etiology, Signs and Treatment of Aṅgārti (Pain in Limbs)

स्नेहस्वेदैरनापाद्य गुरुस्तीक्ष्णोऽतिमात्रया।
यस्य बस्तिः प्रयुज्येत सोऽतिमात्रं प्रवर्तयेत्।। ४७।।
स्रुतेषु तस्य दोषेषु निरूढस्यातिमात्रशः।
स्तब्धोदावृतकोष्ठस्य वायुः संप्रतिहन्यते।। ४८।।

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विलोमनसमुद्भूतो रुजत्यङ्गानि देहिनः।
गात्रवेष्टननिस्तोदभेदस्फुरणजृम्भणैः ।। ४९।।
तं तैललवणाभ्यक्तं सेचयेदुष्णवारिणा।
एरण्डपत्रनिष्क्वाथैः प्रस्तरैश्चोपपादयेत्।। ५०।।
यवान् कुलत्थान् कोलानि पञ्चमूले तथोभये।
जलाढकद्वये पक्त्वा पादशेषेण तेन च।। ५१।।
कुर्यात् सबिल्वतैलोष्णलवणेन निरूहणम्।
तं निरूढं समाश्वस्तं द्रोण्यां समवगाहयेत्।। ५२।।
ततो भुक्तवतस्तस्य कारयेदनुवासनम्।
यष्टीमधुकतैलेन बिल्वतैलेन वा भिषक्।। ५३।।

If without oleation and fomentation therapies, the patient is given enema, ingredients of which are *guru* (heavy) and *tīkṣṇa* (sharp) in large dose, then there will be excessive elimination.

When the *doṣa* is eliminated in excessive quantity by *nirūha-basti,* then because of stiffness and occlusion in the gastro-intestinal tract, *vāyu* gets impeded. By its upward movement, it causes pain in the limbs of a person in the form of cramps, pricking pain, breaking pain, throbbing pain and *jṛmbhaṇa* (stretching pain).

To this patient, massage with oil added with salt should be given, and his body should be sprinkled with warm water. He should be given fomentation with the decoction of the leaves of *eraṇḍa* and *prastara* type of fomentation (vide *Sūtra* 14 : 47-48).

Yava, kulattha, kola and both the types of *pañca-mūla* (*bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*) should be added with two *āḍhakas* (512 *tolās*) of water, and boiled till one fourth of the liquid remains. To this decoction, warm *Bilva-taila* and salt should be added. This recipe may be used for *nirūha-basti.* Thereafter, the patient should be comforted and given tub-bath.

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After he has taken food, the physician should give him *anuvāsana* or unctuous type of enema with *Yaṣṭi-madhu-taila* or *Bilva-taila*. [47 - 53]

Even though, *anuvāsana-basti* is to be given after food as a general rule, mention of *'bhuktavataḥ'* i.e. "of the person who has taken food" in the verse no. 53 implies emphasis.

Etiology, Signs and Treatment of Parikartikā (Sawing Pain)

मृदुकोष्ठाल्पदोषस्य रूक्षस्तीक्ष्णोऽतिमात्रवान्।
बस्तिर्दोषान्निरस्याशु जनयेत् परिकर्तिकाम्।। ५४।।
त्रिकवङ्क्षणबस्तीनां तोदं नाभेरधो रुजम्।
विबन्धोऽल्पाल्पमुत्थानं बस्तिनिर्लेखनाद्भवेत्।। ५५।।
स्वादुशीतौषधैस्तत्र पय इक्ष्वादिभिः श्रृतम्।
यष्ट्याह्वतिलकल्काभ्यां बस्तिः स्यात् क्षीरभोजिनः।। ५६।।
ससर्जरसयष्ट्याह्वजिङ्गिनीकर्दमाञ्जनम् ।
विनीय दुग्धे बस्तिः स्याद् व्यक्ताम्लमृदुभोजिनः।। ५७।।

If enema with ununctuous and sharp ingredients is given in a large dose to a patient who has laxed bowel and who has less of aggravated *doṣas*, then it immediately eliminates *doṣas* to cause *parikartikā* (sawing pain), pricking pain in the lumbar region, groins and the region of urinary bladder and pain in the lower abdomen below the umbilical region. Because of the scraping effect of enema, the patient suffers from constipation and frequent voiding of stool in small quantities.

Milk should be boiled by adding sweet and cooling ingredients like sugar-cane, etc. To this medicated milk, the paste of *yaṣṭi-madhu* and *tila* should be added. Enema should be given with this recipe keeping the patient on milk diet.

Milk should be added with *sarja-rasa, yaṣṭi-madhu, jiṅginī, kardama* (mud) and *añjana* (solid extract of *dāru-haridrā*). This recipe should be added with sour juice and used as enema for the patient who is on soft diet. [54-57]

[Cakrapāṇi has used the term "*vyaktāmla*...." as the epithet of

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basti. If this is accepted, then it should be read as "*vyaktāmlaḥ mṛdubhojinaḥ*", i.e. two different words not in compound form.]

Etiology, Signs and Treatment of Parisrava (Anal Exudation)

पित्तरोगेऽम्ल उष्णो वा तीक्ष्णो वा लवणोऽथवा।
बस्तिर्लिखति पायुं तु क्षिणोति विदहत्यपि।। ५८।।
स विदग्धः स्रवत्यस्रं पित्तं चानेकवर्णवत्।
सार्यते बहुवेगेन मोहं गच्छति चासकृत्।। ५९।।
आर्द्रशाल्मलिवृन्तैस्तु क्षुण्णैराजं पयः श्रृतम्।
सर्पिषा योजितं शीतं बस्तिमस्मै प्रदापयेत्।। ६०।।
वटादिपल्लवेष्वेष कल्पो यवतिलेषु च।
सुवर्चलोपोदिकयोः कर्बुदारे च शस्यते।। ६१।।
गुदे सेकाः प्रदेहाश्च शीताः स्युर्मधुराश्च ये।
रक्तपित्तातिसारघ्नी क्रिया चात्र प्रशस्यते।। ६२।।

If a patient suffering from *paittika* diseases is given enema with ingredients which are sour, hot, sharp or saline, then this causes scraping of the anus resulting in ulceration and burning sensation. From this inflammed anus there is exudation of blood and *pitta* having variegated colour. Because of forceful exudation the patient faints frequently.

To this patient, cold enema of goat's milk boiled by adding pounded green stalks of *śālmali*, and added with ghee should be given.

This enema may also be prepared with the following recipes :

(1) Leaves of *vaṭa*, etc.;

(2) *Yava* and *tila*;

(3) *Sauvarcala* (*sunisaṇṇaka*) and *upodikā*; and

(4) *Karbudāra* (*kāñcanāra*).

The anal region of the patient should be sprinkled (*seka*) or anointed with drugs which are cooling and sweet. Therapies prescribed for *rakta-pitta* (vide *Cikitsā* 3) and *atisāra* (vide *Cikitsā* 19) are also useful in this condition. [58-62]

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Drugs for Mild and Strong Enema

तीक्ष्णत्वं मूत्रपील्वग्निलवणक्षारसर्षपैः।
प्राप्तकालं विधातव्यं क्षीराद्यैर्मार्दवं तथा।। ६३।।

When required, the recipe of enema can be made strong by adding ingredients like cow's urine, *pīlu* (a fruit of *Uttarapatha*), *agni* (*citraka*), salt, alkalies and mustard seed. By adding milk, etc., the enema recipe can be made milder in action when required. [63]

In different conditions described before, strong and mild recipes are described to be used. The way of making a recipe strong or mild is described above.

Some scholars use the term '*bilva*' in the place of '*pīlu*'.

Importance of Basti

आपादतलमूर्धस्थान् दोषान् पक्वाशये स्थितः।
वीर्येण बस्तिरादत्ते खस्थोऽर्को भूरसानिव।। ६४।।

Basti (medicated enema) lodged in the colon, by its potency, draws [and eliminates] morbid *doṣas* located in the entire body right from foot to head just as the sun situated in the sky absorbs all the moisture (lit. juice) from the earth. [64]

The *basti*, because of its special potency, could draw and eliminate morbid *doṣas* from all over the body on the same day. This does not happen in the case of other therapeutic measures like *pācana* (carminatives). A similar description regarding the therapeutic efficacy of *basti* is also described in *Suśruta* : *Cikitsā* 35 : 27.

Elimination of Morbid Matter Excluding Nutrients

यद्वत् कुसुम्भसंमिश्रात्तोयाद्रागं हरेत् पटः।
तद्वद्द्रवीकृतादेहान्निरूहो निहरेन्मलान्।। ६५।।

As a piece of cloth soaked in the water mixed with the powder of *kusumbha* (a vegetable dye) sucks up the pigments, similarly from the body in which both (the nutrients and morbid matter) are liquefied (because of oleation and fomentation therapies), only the morbid matter gets eliminated by *nirūha* (evacuative) type of medicated enema. [65]

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The term '*mala*' used in the text implies both the stool and morbid *doṣas*.

Epilogue

तत्र श्लोकः–

इत्येता व्यापदः प्रोक्ता बस्तेः साकृतिभेषजाः।
बुद्ध्वा कात्स्न्र्येन तान् बस्तीन्नियुञ्जन्नापराध्यति।। ६६।।

To sum up :

Thus, the complications of *basti* along with their signs and treatment are described. The physician administering *basti* (medicated enema) after proper comprehension of this therapy in all its aspects does not commit any error. [66]

Complications arise because of improper administration of *basti*. Therefore, administration of *basti* by a physician having complete knowledge of this therapy does not lead to any complication.

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढ-
बलसंपूरिते सिद्धिस्थाने बस्तिव्यापत्सि-
द्धिर्नाम सप्तमोऽध्यायः।। ७।।

Thus, ends the Seventh chapter of *Siddhi-sthāna* dealing with "the Successful Treatment of Complications of *Basti* (Enema) Therapy" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - VIII

अष्टमोऽध्यायः

(RECIPES FOR NIRŪHA)

Prologue

अथातः प्रासृतयोगीयां सिद्धिं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

Now we shall expound the chapter on the "Successful Administration of Enema with Recipes having Ingredients Measured in the Unit Quantity of *Prasṛta*".

Thus, said Lord Ātreya. [1-2]

In the previous chapter, complications of enema therapy was discussed. In the present chapter, recipes for enema for the treatment of those complications will be described. Recipes, ingredients of which are used in the unit quantity of *prasṛta,* are mainly described here because of which this chapter is titled as "*Prāsṛta-yogīya Siddhi*". Of course, other types of recipes are also described here, but these are of secondary nature.

Dialogue

अथेमान् सुकुमाराणां निरूहान् स्नेहनान् मृदून्।
कर्मणा विप्लुतानां च वक्ष्यामि प्रसृतैः पृथक्।।३।।

Hereafter, I (refers to Lord Ātreya) shall explain unctuous and mild recipes of *nirūha-basti* (evacuative type of medicated enema), ingredients of which are to be taken in the unit quantity of *prasṛta* (two *palas*) for persons of tender health and for those who are exhausted because of hard work. [3]

Recipes of *nirūha-basti* having ingredients in the unit quantities of *prasṛta* (two *palas*) are described only in the beginning of this chapter. Later, other recipes having ingredients in different other unit quantities (other than *prasṛta*) are described.

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(1) Recipe of Nirūha for Promotion of Complexion, Etc.

क्षीराद् द्वौ प्रसृतौ कार्यौ मधुतैलघृतात्त्रयः।
खजेन मथितो बस्तिर्वातघ्नो बलवर्णकृत्।। ४।।

Two *prasṛtas* of milk and three *prasṛtas* of honey, oil and ghee (taken together) should be stirred with a stirrer. *Basti* (enema) of this recipe eliminates *vāyu,* and promotes strength as well as complexion. [4]

In recipes of *basti,* generally paste, etc., are to be added in a particular proportion when the quantity of the ingredients is not specified. If the quantities of ingredients are only partially mentioned, even then the general rule of adding paste (*kalka*), etc., should be followed.

In the above mentioned recipe, the quantities of ingredients are fully and specifically mentioned. Hence these are to be used as such, and no other unspecified ingredients in the form of paste, etc., need to be added.

(2) Recipe of Nirūha for Vāyu

एकैकः प्रसृतस्तैलप्रसन्नाक्षौद्रसर्पिषाम्।
बिल्वादिमूलक्वाथाद्द्वौ कौलत्थाद्द्वौ स वातनुत्।। ५।।

Enema with the recipe containing one *prasṛta* each of oil, *prasannā* (a type of alcohol), honey and ghee, and two *prasṛtas* each of the decoctions of *bilva,* etc., (*bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*) as well as *kulattha* cures *vāyu.* [5]

(3) Second Recipe of Nirūha for Vāyu

पञ्चमूलरसात् पञ्च द्वौ तैलात् क्षौद्रसर्पिषोः।
एकैकः प्रसृतो बस्तिः स्नेहनीयोऽनिलापहः।। ६।।

Five *prasṛtas* of the decoction of *pañca-mūla* (*bilva, śyonāka, gambhārī, pāṭalā* and *gaṇikārikā*), two *prasṛtas* of til oil and one *prasṛta* each of honey as well as ghee should be used in *basti* (enema) for oleation and cure of *vāyu*-diseases. [6]

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(4) Recipe of Nirūha for Promotion of Semen

सैन्धवार्धाक्ष एकैकः क्षौद्रतैलपयोघृतात्।
प्रसृतो हपुषाकर्षो निरूहः शुक्रकृत् परम्।। ७।।

The recipe of *nirūha* containing half *akṣa* (*tolā*) of rock-salt, one *prasṛta* each of honey, til-oil, milk and ghee, and one *karṣa* (*tolā*) of *hapuṣā* is excellent for the promotion of semen. [7]

(5) Pañca-tikta Nirūha

पटोलनिम्बभूनिम्बरास्नासप्तच्छदाम्भसः ।
चत्वारः प्रसृता एको घृतात् सर्षपकल्कितः।। ८।।
निरूहः पञ्चतिक्तोऽयं मेहाभिष्यन्दकुष्ठनुत्।

Four *prasṛtas* of the decotion of *paṭola, nimba, bhū-nimba, rāsnā* and *saptacchada,* and one *prasṛta* of ghee should be added with the paste of *sarṣapa.* This recipe is called *Pañca-tikta nirūha.* Administration of this *basti* cures *meha* (obstinate urinary disorders including diabetes), *abhiṣyanda* (conjunctivitis) and *kuṣṭha* (obstinate skin diseases including leprosy). [8 - $^{1}/_{2}$ 9]

The quantity of the *sarṣapa*-paste is not specified in the above recipe. Therefore, it is to be determined according to the general rule. In twelve *prasṛtas* of liquid, for *nirūha*, two *palas* of the paste is to be added according to general rule. Thus, in the above mentioned recipe which has five *prasṛtas* of liquid, the paste should be 1/12th of five *prasṛtas*, i.e. 10/12 *palas* or 1/6th less than one *pala.*

The quantity of ingredients when not specified in other recipes has to be determined accordingly.

(6) Recipe of Nirūha for Helminthiasis

विडङ्गत्रिफलाशिग्रुफलमुस्ताखुपर्णिजात् ।।९।।
कषायात् प्रसृताः पञ्च तैलादेको विमथ्य तान्।
विडङ्गपिप्पलीकल्को निरूहः क्रिमिनाशनः।। १०।।

Five *prasṛtas* of the decoction of *viḍaṅga, harītakī, bibhītaka, āmalakī, śigru, madana-phala, mustā* and *ākhu-parṇī* (*dantī*) should be added with one *prasṛta* of til oil, and

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the paste of *viḍaṅga* and *pippalī*. The recipe should be stirred (emulcified) and used for *nirūha* (evacuative) type of medicated enema which cures helminthiasis. [$9^1/_2$ - 10]

(7) Recipe of Nirūha for Virility

पयस्येक्षुस्थिरारास्नाविदारीक्षौद्रसर्पिषाम् ।
एकैकः प्रसृतो बस्तिः कृष्णाकल्को वृषत्वकृत्।। ११।।

Basti with the recipe containing one *prasṛta* each (of the decoctions) of *payasyā*, sugar-cane [juice], *sthirā, rāsnā* and *vidārī*, one *prasṛta* each of honey and ghee, and the paste of *kṛṣṇā* (*pippalī*) promotes virility (semen). [11]

The form in which *payasyā*, etc., are to be used in the recipe is not specified in the text. Since along with other liquid ingredients, these are described to be used in the quantity of one *prasṛta* each, obviously these are to be used in the form of liquid, i.e. decoction.

(8) Recipe of Nirūha for Bhedana

चत्वारस्तैलगोमूत्रदधिमण्डाम्लकाञ्जिकात् ।
प्रसृताः सर्षपैः कल्कैर्विट्सङ्घानाहभेदनः।। १२।।

Basti (enema) with four *prasṛtas* of til-oil, cow's urine, whey and sour conjee, added with the paste of *sarṣapa* causes *bhedana* (disintegration) and elimination of arrested stool (*viṭ-saṅga*) of a constipated patient. [12]

(9) Recipe of Nirūha for Dysuria

श्वदंष्ट्राश्मभिदेरण्डरसात्तैलात् सुरासवात्।
प्रसृताः पञ्च यष्ट्याह्वकौन्तीमागधिकासिताः।। १३।।
कल्कः स्यान्मूत्रकृच्छ्रे तु सानाहे बस्तिरुत्तमः।

The recipe containing five *prasṛtas* of the decoction of *śvadaṃṣṭrā, aśma-bheda* and *eraṇḍa,* til oil and *surāsava* (alcoholic preparation), and added with the paste of *yaṣṭi-madhu, kauntī, māgadhikā* and *sitā* should be used for enema which is excellent for curing *mūtra-kṛcchra* (dysuria) and *ānāha* (constipation). [13 - $^1/_2$ 14]

एते सलवणाः कोष्णा निरूहाः प्रसृतैर्नव।। १४।।

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Thus, nine recipes of *nirūha* with ingredients having the unit quantity described in the form of *prasṛta*, are elaborated above (in verse nos. 4 - $^{1}/_{2}$14). These recipes, when warm are to be used along with salt. [14 $^{1}/_{2}$]

Administration of Repeated Basti

मृदुबस्तिजडीभूते तीक्ष्णोऽन्यो बस्तिरिष्यते।
तीक्ष्णैर्विकर्षिते स्वादु प्रत्यास्थापनमिष्यते।। १५।।

If a mild enema (*nirūha*) gets stagnated, then another strong *basti* having sharp ingredients is to be administered.

If, because of strong enema, the patient becomes excessively depleted, then another *nirūha* or *āsthāpana basti* containing sweet drugs (like *ghṛta,* etc.,) should be given to him. [15]

When another *āsthāpana* or *nirūha* enema is given to counteract the adverse effects of the previous enema, then it is called *pratyāsthāpana* (*prati-āsthāpana*).

Recipe for Burning Sensation in Anus

वातोपसृष्टस्योष्णैः स्युर्गुददाहादयो यदि।
द्राक्षाम्बुना त्रिवृत्कल्कं दद्याद्दोषानुलोमनम्।। १६।।
तद्धि पित्तशकृद्वातान् हृत्वा दाहादिकाञ्जयेत्।
शुद्धश्चापि पिबेच्छीतां यवागूं शर्करायुताम्।। १७।।

If the administration of hot *basti* to a *vāyu*-afflicted person gives rise to burning sensation in the anus, and such other complications (like fainting and morbid thirst), then he should be given *drākṣā*-decoction mixed with the paste of *trivṛt* which causes downward movement of *doṣas*. By causing elimination of bile, stool and flatus, this recipe cures *dāha* (burning sensation), etc.

After the body is cleansed [of more morbid matter], the patient should take cold *yavāgū* (thick gruel) mixed with sugar. [16 - 17]

Intake of the juice of *drākṣā* mixed with the paste of *trivṛt* causes

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alleviation of both *vāta* and *pitta* which are responsible for *dāha* (burning sensation).

Treatment of Diminished Stool

अथवाऽतिविरिक्तः स्यात् क्षीणविट्कः स भक्षयेत्।
माषयूषेण कुल्माषान् पिबेन्मध्वथवा सुराम्।। १८।।

Alternatively, if because of excessive purgation, the patient suffers from excessive loss of fecal matter, then he should eat *kulmāṣa* (food containing half steamed barley) along with the soup of *māṣa* or he should drink honey or *surā* type of alcohol. [18]

Treatment of Six Types of Diarrhoea

सामं चेत् कुणपं शूलैरुपविशेदरोचकी।
स घनातिविषाकुष्ठनतदारुवचाः पिबेत्।। १९।।
शकृद्वातमसृक् पित्तं कफं वा योऽतिसार्यते।
पक्वं, तत्र स्ववर्गीयैर्बस्तिः श्रेष्ठं भिषग्जितम्।। २०।।

If the patient voids *āma* (mucus which is uncooked) which has the smell of a dead body and which is associated with colic pain as well as anorexia, then he should drink the decoction of *ghana, ativiṣā, kuṣṭha, nata, deva-dāru* and *vacā.*

If the patient excessively voids stool, flatus, blood, *pitta* or *kapha* which are *pakva* (cooked), then enema prepared with groups of drugs appropriate to each of these morbidities is the best remedy. [19 - 20]

In the above text, six types of diarrhoea are described which are as follows :

(1) Diarrhoea in which only *āma* (mucus or uncooked material in the gastro-intestinal tract) is voided;

(2) Diarrhoea with the voiding of stool which is *pakva* or cooked, i.e. free from *āma* (uncooked product);

(3) Diarrhoea with the voiding of flatus which is *pakva* or cooked, i.e. free from *āma* (uncooked material);

(4) Diarrhoea with voiding of blood which is *pakva* or cooked, i.e. free from *āma* or uncooked material;

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(5) Diarrhoea with the voiding of *pitta* which is *pakva* or cooked, i.e. free from *āma* or uncooked material; and

(6) Diarrhoea with voiding of *kapha* which is *pakva* or cooked, i.e. free from *āma* or uncooked material.

[Recipe for the first type of diarrhoea is described in the above text. For the remaining five types of diarrhoea, drugs appropriate to these morbidites are to be selected and used in the form of a recipe.]

The term '*āma*' implies the first product of food which has remained uncooked or undigested because of the weakness of the *agni* (enzymes) located in the stomach and small intestine. It remains adhered to the wall of the gastro-intestinal tract.

Groups of drugs to be used in the enema recipes for the last five types of diarrhoea are *Purīṣa-saṅgrahaṇīya* (vide *Sūtra* 4 : 15), *Vātaghna* (vide *Sūtra* 20 : 13), *Śoṇitāsthāpanīya* (vide *Sūtra* 4 : 18), *Pitta-hara* (vide *Sūtra* 20 : 16) and *Kaphaghna* (vide *Sūtra* 20 : 19) respectively.

Number of Diarrhoeas

षण्णामेषां द्विसंसर्गात् त्रिंशद्भेदा भवन्ति तु।
केवलैः सह षट्त्रिंशद्विद्यात् सोपद्रवानपि।। २१।।

The above mentioned six types of diarrhoea may get manifested in the form of the combination of two types — thus making thirty more varieties. Added with the main six varieties, they, thus constitute thirty six varieties of diarrhoea which are manifested along with their complications. [21]

Complications of Diarrhoea

शूलप्रवाहिकाध्मानपरिकर्त्यरुचिज्वरान् ।
तृष्णोष्णदाहमूर्च्छादींश्चैषां विद्यादुपद्रवान्।। २२।।

Colic pain (*śūla*), gripping pain (*pravāhikā*), flatulence (*ādhmāna*), sawing pain (*parikartikā*), anorexia (*aruci*), fever (*jvara*), morbid thirst (*tṛṣṇā*), hot feeling (*uṣṇa*), burning sensation (*dāha*), fainting (*mūrcchā*), etc., are the complications of diarrhoea. [22]

Treatment of Diarrhoea with Āma

तत्रामेऽन्तरपानं स्यात् व्योषाम्ललवणैर्युतम्।
पाचनं शस्यते बस्तिरामे हि प्रतिषिध्यते।। २३।।

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If there is diarrhoea of *āma* type (containing mucus or uncooked product of digestion), then the recipe for *pācana* (carminative drugs described in the verse no. 19) along with *śuṇṭhī, pippalī, marica* and sour as well as saline drugs is useful. Administration of enema in *āma* condition is prohibited. [23]

Treatment of Diarrhoea Along with Fecal Matter

वातघ्नैर्ग्राहिवर्गीयैर्बस्तिः शकृति शस्यते।

Enema prepared with *vāyu*-alleviating and *grāhi* (astringent) group of drugs is useful if the diarrhoea is associated with fecal matter. [$^{1}/_{2}$ 24]

Daśa-mūla (*bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*) alleviates *vāyu*. *Grāhi* or stringent group of drugs are described in *Caraka* : *Sūtra* 4 : 15. In the place of '*vātaghna*', Jatūkarṇa has described *śophaghna* (or oedema-reducing drugs). This also refers to *daśa-mūla*.

Treatment of Diarrhoea With Flatus

स्वाद्वम्ललवणैः शस्तः स्नेहबस्तिः समीरणे।। २४।।

If the diarrhoea is associated with the voiding of flatus, then *sneha* or *anuvāsana-basti* (unctuous enema) prepared of [fat cooked with] sweet, sour and saline drugs is useful. [$24^{1}/_{2}$]

Treatment of Diarrhoea with Blood, Pitta and Kapha

रक्ते रक्तेन, पित्ते तु कषायस्वादुतिक्तकैः।
सार्यमाणे कफे बस्तिः कषायकटुतिक्तकैः।। २५।।

If the diarrhoea is associated with the voiding of blood, then enema of blood is useful.

If there is diarrhoea with the voiding of *pitta*, then enema prepared of astringent, sweet and bitter drugs is useful.

If there is diarrhoea associated with the voiding of *kapha*, then enema prepared of astringent, pungent and bitter drugs is useful. [25]

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Treatment of Diarrhoea Caused by Two Factors

शकृता वायुना वाऽऽमे तेन वर्चस्यथानिले।
संसृष्टेऽन्तरपानं स्याद् व्योषाम्ललवणैर्युतम्।। २६।।
पित्तेनामेऽसृजा वाऽपि तयोरामेन वा पुनः।
संसृष्टयोर्भवेत् पानं सव्योषस्वादुतिक्तकम्।। २७।।
तथाऽऽमे कफसंसृष्टे कषायव्योषतिक्तकम्।
आमेन तु कफे व्योषकषायलवणैर्युतम्।। २८।।
वातेन विशि पित्ते वा विट्पित्ताभ्यां तथाऽनिले।
मधुराम्लकषायः स्यात् संसृष्टे बस्तिरुत्तमः।। २९।।
शकृच्छोणितयोः पित्तशकृतो रक्तपित्तयोः।
बस्तिरन्योन्यसंसर्गे कषायस्वादुतिक्तकः।। ३०।।
कफेन विशि पित्ते वा कफे विट्पित्तशोणितैः।
व्योषतिक्तकषायः स्यात् संसृष्टे बस्तिरुत्तमः।। ३१।।
स्याद्बस्तिर्व्योषतिक्ताम्लः संसृष्टे वायुना कफे।
मधुरव्योषतिक्तस्तु रक्ते कफविमूर्च्छिते।। ३२।।
मारुते कफसंसृष्टे व्योषाम्ललवणो भवेत्।
बस्तिर्वातेन पित्ते तु कार्यः स्वाद्वम्लतिक्तकः।। ३३।।

Pācana (carminative recipe) added with *śuṇṭhī, pippalī, marica,* sour ingredients and salt should be given, if the diarrhoea is caused by the combination of two factors as follows :

(1) More of *āma* and less of fecal matter;

(2) More of *āma* and less of flatus;

(3) More of fecal matter and less of *āma;* and

(4) More of flatus and less of *āma.*

Pācana (carmiantive recipe) added with *śuṇṭhī, pippalī marica,* and sweet as well as bitter drugs should be given if the diarrhoea is caused by two factors as follows :

(1) Less of *pitta* and more of *āma*;

(2) Less of blood and more of *āma*;

(3) Less of *āma* and more of *pitta*; and

(4) Less of *āma* and more of blood.

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Pācana (carminative recipe) added with astringent drugs, *śuṇṭhī, pippalī, marica* and bitter drugs should be given to the patient if the diarrhoea is caused by two factors, viz., more of *āma* and less of *kapha*.

Pācana (carminative recipe) added with *śuṇṭhī, pippalī* and *marica*, and astringent drugs as well as salt should be given to the patient if the diarrhoea is caused by two factors, viz., less of *āma* and more of *kapha*.

Enema-recipe containing sweet, sour and astringent drugs is useful if the diarrhoea is caused by two factors as follows:

(1) Less of *vāyu* and more of fecal matter;

(2) Less of *vāyu* and more of *pitta;*

(3) More of *vāyu* and less of fecal matter; and

(4) More of *vāyu* and less of *pitta*.

Enema-recipe containing astringent, sweet and bitter drugs should be given if the diarrhoea is caused by two factors as follows :

(1) More of fecal matter and less of blood;

(2) More of blood and less of fecal matter;

(3) More of *pitta* and less of fecal matter;

(4) More of fecal matter and less of *pitta*;

(5) More of blood and less of *pitta*; and

(6) More of *pitta* and less of blood.

Enema-recipe contianing *śuṇṭhī, pippalī* and *marica,* and bitter as well as astringent drugs is very useful if the diarrhoea is caused by two factors as follows :

(1) Less of *kapha* and more of fecal matter;

(2) Less of *kapha* and more of *pitta*;

(3) More of *kapha* and less of fecal matter;

(4) More of *kapha* and less of *pitta*; and

(5) More of *kapha* and less of blood.

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Enema-recipe containing *śuṇṭhī, pippalī* and *marica*, and bitter as well as sour drugs is useful if the diarrhoea is caused by two factors, viz., more of *kapha* and less of *vāyu.*

Enema-recipe containing *śuṇṭhī, pippalī* and *marica,* and sweet as well as bitter drugs is useful if the diarrhoea is caused by two factors, viz., more of blood and less of *kapha.*

Enema-recipe containing *śuṇṭhī, pippalī, marica*, sour drugs and salt is useful in diarrhoea caused by two factors, viz., more of *vāyu* and less of *kapha.*

Enema-recipe containing sweet, sour and bitter drugs should be given if the diarrhoea is caused by two factors, viz., less of *vāyu* and more of *pitta.* [26-33]

In the above text, use of the conditions in instrumental case indicates their secondary nature, and in locative case indicates their primary nature.

Treatment of Diarrhoea Caused by More Than Two Factors

त्रिचतुःपञ्चसंसर्गानेवमेव विकल्पयेत्।
युक्तिश्चैषातिसारोक्ता सर्वरोगेष्वपि स्मृता।। ३४।।

When the diarrhoea is caused by the combination of three, four or five factors, the corresponding therapeutic measures should be combined and administered.

The methodology of selecting treatment enumerated above with reference to diarrhoea is applicable to all the diseases. [34]

Depending upon the combination of various factors, and after determining the predominant and subordinate ones amongst them, appropriate therapeutic measures should be employed in the case of all the other diseases also. Mentioning these numbers and other details would be too exhaustive to be stated in a text. Therefore, a physician should use his wisdom to determine their varieties while selecting a therapy for their treatment. According to the Preceptor, this rule is applicable to all diseases.

Grahaṇī-roga (sprue syndrome) is of six types. There are other diseases which are of three or four types. In all such cases also different varieties should be determined by permutation and combination.

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Treatment of Diarrhoea Caused by All Six Factors

युगपत् षड्रसं षण्णां संसर्गे पाचनं भवेत्।
निरामाणां तु पञ्चानां बस्तिः षाड्रसिको मतः।। ३५।।

When all the six morbific factors are combined to cause diarrhoea, then a recipe of *pācana* (carminative) consisting of drugs of all the six tastes should be given. When five out of the six morbific factors (excluding *āma*) are combined to cause diarrhoea, then *basti* (enema) having ingredients of all the six tastes should be given.

Medicated Ghee for Diarrhoea

उदुम्बरशलाटूनि जम्ब्वाम्रोदुम्बरत्वचः।
शङ्खं सर्जरसं लाक्षां कर्दमं च पलांशिकम्।। ३६।।
पिष्ट्वा तैः सर्पिषः प्रस्थं क्षीरद्विगुणितं पचेत्।
अतीसारेषु सर्वेषु पेयमेतद्यथाबलम्।। ३७।।

One *pala* each of *udumbara-śalāṭu* (unripe fruits cut into slices and dried), barks of *jambū, āmra* as well as *udumbara, śaṅkha* (conch-shell), *sarja-rasa, lākṣā* and *kardama* should be made to a paste. Along with this paste, one *prastha* of ghee should be cooked by adding double the quantity of milk. In accordance with the strength of the patient, this medicated ghee should be given as a potion for all the types of diarrhoea.

[36 - 37]

Medicated Gruels for Diarrhoea

कच्छुराधातकीबिल्वसमङ्गारक्तशालिभिः ।
मसूराश्वत्थशुङ्गैश्च यवागूः स्याज्जले शृतैः।। ३८।।
बालोदुम्बरकट्वङ्गसमङ्गाप्लक्षपल्लवैः ।
मसूरधातकीपुष्पबलाभिश्च तथा भवेत्।। ३९।।
स्थिरादीनां बलादीनामिक्ष्वादीनामथापि वा।
क्वाथेषु समसूराणां यवाग्वः स्युः पृथक् पृथक्।। ४०।।
कच्छुरामूलशाल्यादितण्डुलैरुपसाधिताः ।
दधितक्रारनालाम्लक्षीरेष्विक्षुरसेऽपि वा।। ४१।।

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शीताः सशर्कराक्षौद्राः सर्वातीसारनाशनाः।
ससर्पिर्मरिचाजाज्यो मधुरा लवणाः शिवाः।। ४२।।

Following recipes of *yavāgū* (thick gruel) are useful for the patient suffering from diarrhoea :

(1) A decoction should be prepared of *kacchurā* (*kapi-kacchū*), *dhātakī, bilva, samaṅgā,* red variety of *śāli*-rice, *masūra* and stilt roots of *aśvattha* by boiling with water. (The procedure prescribed for *Ṣaḍaṅga-pānīya* is to be followed in this connection - vide commentary on *Caraka* : *Cikitsā* 3 : 145). *Yavāgū* (thick gruel) should be prepared with this decoction;

(2) Similarly, *yavāgū* may be prepared with the decoction of unripe *udumbara* (made into slices), *kaṭvaṅga* (*aralu*), *samaṅgā,* leaves of *plakṣa, masūra, dhātakī*-flower and *balā;*

(3) *Yavagū* may be prepared with the decoction of the drugs belonging to *Sthirādi*-group along with *masūra*;

(4) *Yavāgū* may be prepared with the decoction of drugs belonging to *Balādi*-group along with *masūra*;

(5) *Yavāgū* may be prepared with the decoction of drugs belonging to *Ikṣvādi*-group along with *masūra*; and

(6) *Yavāgū* may be prepared with the root of *kacchurā* (*kapi-kacchū*) and rice of *śāli*, etc., and added with curd, butter-milk, sour *kāñjī,* milk and sugar-cane juice. Intake of this gruel, when cold and added with sugar and honey, cures all the types of diarrhoea.

The above mentioned gruels are auspicious (for curing diarrhoea) when added with ghee, *marica, ajājī,* sweet ingredients and salt. [38 - 42]

Recapitulation

भवन्ति चात्र श्लोकाः-
स्निग्धाम्ललवणमधुरं पानं बस्तिश्च मारुते कोष्णः।
शीतं तिक्तकषायं मधुरं पित्ते च रक्ते च।। ४३।।

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तिक्तोष्णकषायकटु श्लेष्मणि संग्राहि वातनुच्छकृति।
पाचनमामे पानं पिच्छासृग्बस्तयो रक्ते।। ४४।।
अतिसारं प्रत्युक्तं मिश्रं द्वन्द्वादियोगजेष्वपि च।
तत्रोद्रेकविशेषाद्दोषेषूपक्रमः कार्यः।। ४५।।

Thus, it is said :

In diarrhoea caused by *vāyu*, the patient should drink *pācana* (carminative recipe), and use luke warm *basti* (enema) containing unctuous, sour, saline and sweet ingredients.

In diarrhoea caused by *pitta* and *rakta* (vitiated blood), the patient should be given *pācana* (carminative recipe) containing cooling, bitter, astringent and sweet ingredients.

In diarrhoea caused by vitiated *kapha*, the patient should be given the recipe containing bitter, hot, astringent and pungent ingredients.

In diarrhoea caused by vitiated fecal matter, the patient should take recipes (in the form of enema, etc.), which are constipative and which are alleviators of *vāyu*.

In diarrhoea caused by *āma* (uncooked product of digestion), the patient should drink *pācana* (carminative recipe).

In diarrhoea caused by vitiated blood, the patient should be given *picchā-basti* (medicated enema containing mucilaginous material) and enema of blood.

In this way, various methods of treating diarrhoea are described.

If the diarrhoea is caused by more than one factor, then the respective therapies should be given in a combined form.

Among these combined factors, the principle of treatment should be followed to correct the predominant ones first.

[43-45]

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Epilogue

तत्र श्लोकः-

प्रासृतिकाः सव्यापत्क्रिया निरूहास्तथाऽतिसारहिताः।
रसकल्पघृतयवाग्वश्चोक्ता गुरुणा प्रसृतसिद्धौ।। ४६।।

To sum up :

In this chapter "On the Successful Treatment with Recipes Described with *Prasṛta* as the Unit Quantity of Its Ingredients", the Teacher has described the following topics :

(1) Recipes of *nirūha-basti* ingredients of which are described in the unit quantity of *prasṛta* (vide verse nos. 4-14);

(2) Complications arising out of mild recipe for enema, etc., and their treatment (vide verse no. 15-18);

(3) Recipes for *nirūha-basti*, and those containing ingredients of different tastes for the treatment of diarrhoea (vide verse nos. 19-35);

(4) Recipe of medicated ghee for the treatment of diarrhoea (vide verse nos. 36-37); and

(5) Recipes of medicated gruel for the treatment of diarrhoea (vide verse nos. 38-42). [46]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते
दृढबलसंपूरिते सिद्धिस्थाने प्रसृतयो-
गीयसिद्धिर्नामाष्टमोऽध्यायः।। ८।।

Thus, ends the eighth chapter of *Siddhi*-section dealing with the "Success in Treatment with Recipes Ingredients of which are Described in the Unit Quantity of *Prasṛta*" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - IX

नवमोऽध्यायः

(DISEASES OF VITAL ORGANS AND THEIR TREATMENT)

Prologue

अथातस्त्रिमर्मीयां सिद्धिं व्याख्यास्यामः।। १।।
इति ह स्माह भगवानात्रेयः।। २।।

Now, we shall expound the chapter dealing with "Perfection in the Treatment of Diseases Affecting Three Vital Organs".

Thus, said Lord Ātreya. [1-2]

In the previous chapter, treatment of various complications is described. In the present chapter, treatment of complications specially arising out of the diseases located in the three vital organs in being explained.

The justification for the present chapter can also be provided in a different way. In the seventh chapter of this section, treatment of various complications arising out of the wrong administration of enema was described. Diseases of three vital organs are also manifested on account of these complictions. Hence these are described in this chapter.

In the 26th chapter of *Cikitsā*-section, treatment of the diseases occurring in the three vital organs are described. In order to avoid details, certain aspects of these diseases were not described there, and these details are being described in the present chapter.

The term "*tri-marma*" means "three vital organs". The word "*tri-marmīya*" occurring in the title of this chapter implies "diseases located in these three vital organs".

Dialogue

सप्तोत्तरं मर्मशतमस्मिञ्छरीरे स्कन्धशाखासमाश्रितमग्निवेश ! तेषामन्यतमपीडायां समधिका पीडा भवति, चेतनानिबन्धवैशेष्यात्। तत्र शाखाश्रितेभ्यो मर्मभ्यः स्कन्धाश्रितानि गरीयांसि, शाखानां तदाश्रितत्वात्; स्कन्धाश्रितेभ्योऽपि हृद्बस्तिशिरांसि, तन्मूलत्वाच्छरीरस्य।। ३।।

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O ! Agniveśa, (addressed by Preceptor Ātreya), there are one hundred and seven vital spots (*marmas*) located in the trunk and limbs of the body. Affliction of any one of these produces excruciating pain because of the specific association of consciousness in these parts.

Amongst these vital spots, the ones located in the *skandha* (trunk of the body) are more important than the ones located in the *śākhās* (limbs of the body) because these limbs are dependant upon the trunk.

Amongst the vital organs in the trunk, the ones located in the heart, urinary bladder and head are the most important because these organs constitute the very basic substratum of the body. [3]

Vital spots are located in the muscles, vessels, ligaments, bones and joints.

The term '*śākhā*' implies tissue elements like *rakta* (blood)—vide *Sūtra* 11 : 48. In the present context, however, it implies the upper and lower limbs because blood, etc., are present also in the *skandha* or trunk.

Out of these 107 vital spots, 44 are located in the upper and lower limbs, and the rest are located in the trunk. As has been described in *Suśruta* (*Śārīra* 6 : 4), "there are eleven vital spots in each of the four (upper and lower) limbs, twelve are located in the chest and abdomen, fourteen in the back, and thirty seven of these vital spots are located in the head and neck. In *Suśruta* details of all these vital spots are described which have to be followed.

These vital spots are different from other parts of the body inasmuch as in the former the conscious element is specifically predominant by *adṛṣṭa* (unforeseen cause), and this is evident from excruciating pain experienced because of any injury to these spots.

The limbs are dependant upon the trunk because of the following factors :

(a) If the trunk is destroyed then the limbs automatically case to exist;

(b) Limbs get nourishment from *rasa*, etc., which are produced by the digestion of food in the trunk; and

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(c) Injury to the vital spots located in the trunk causes sudden death unlike those located in the limbs.

According to *Suśruta,* injury to vital spots, viz., *śṛṅgāṭaka, adhipati,* two *śaṅkhas* (spots in the temporal regions), *kaṇṭha* (spot in the throat), *śiras* (head), *guda* (anus), *hṛdaya* (heart), *basti* (urinary bladder) and *nābhi* (umbilicus) causes instant death (*sadyaḥ-praāṇa-hara*) - vide *Suśruta* : *Śārīra* 6 : 9.

Head, urinary bladder and heart are the most important vital spots because they constitute the basis of the body. This will be explained in the next paragraph.

There are ten parts of the body, viz., both the *śaṅkha* (temporal region), *kaṇṭha* (throat), *rakta* (blood), *śukra* (semen), *ojas* (vital essence) and *guda* (anus), in addition to head, heart and urinary bladder which are the abodes of the *prāṇa* (*elan vitae* or life force). However, *śaṅkha*, etc., do not constitute the basic substrate of the body like head, heart and urinary bladder. When *vāyu*, etc., affect these three organs, they actually afflict the *prāṇa* (*elan vitae* or life force).

Some scholars include all the remaining seven *prāṇa-āyatanas* (abodes of *elan-vitae*) in the near by head, heart and urinary bladder. Since this type of interpretation has no basis, such an idea should not be entertained.

Heart, Head and Urinary Bladder

तत्र हृदये दश धमन्यः प्राणापानौ मनो बुद्धिश्चेतना महाभूतानि च नाभ्यामरा इव प्रतिष्ठितानि, शिरसि इन्द्रियाणि इन्द्रियप्राणवहानि च स्रोतांसि सूर्यमिव गभस्तयः संश्रितानि, बस्तिस्तु स्थूलगुदमुष्कसेवनीशुक्र-मूत्रवाहिनीनां नाडी(ली)नां मध्ये मूत्रधारोऽम्बुवहानां सर्वस्रोतसामुदधिरिवा-पगानां प्रतिष्ठा, बहुभिश्च तन्मूलैर्मर्मसंज्ञकैः स्रोतोभिर्गगनमिव दिनकरकरै-र्व्याप्तमिदं शरीरम्।। ४।।

As the spokes of a wheel are attached to the centre (*nābhi*), similarly the ten vessels, *prāṇa-vāyu, apāna-vāyu, manas* (mind), *buddhi* (wisdom), consciousness and *mahā-bhūtas* are attached to (associated with) the heart.

Head is the abode of senses, sensory channels and channels carrying *elan vitae* as the sun is the abode of its rays.

The urinary bladder, located in the midst of *sthūla-guda*

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(rectum), *muṣka* (testicles), *sevanī* (pereneal sutures) and seminal as well as urinary channels, is the receptacle of urine into which all the channels of the body carrying liquid elements converge as all the rivers on the earth flow into the ocean.

From the base of these three, viz., heart, head and urinary bladder, which are called *marmas* (vital organs), the entire body is pervaded with channels (*srotas*), as the entire sky is pervaded with the rays of the sun. [4]

The ten vessels attached to the heart are the carriers of *ojas* (vital essence) -- vide *Sūtra* 30 : 3.

Prāṇa-vāyu and *apāna-vāyu* referred to above represent the expiration (*ucchvāsa*) and inspiration (*niśvāsa*) respectively. According to some scholars, these two terms represent two varieties of *vāyu*. They explain that although *apāna-vāyu* is located in the genital organs and the pelvis, still its functions are controlled by the heart because of which heart is described to be its abode.

There are two types of *indriyas* or *karaṇas* (senses), viz., *bahiḥ-karaṇa* (external senses) and *antaḥ-karaṇa* (internal senses). The *maṇas* (mind) described in the above text represents the latter.

Cetanā or consciousness is a manifestation (*vṛtti*) of *buddhi* or wisdom.

Mahā-bhūtas described above represent the subtle *bhūtas* (*sūkṣma-bhūtas*) which migrate in association with the soul. All these are already described in *Sāṅkhya-darśana* and the *Śārīra*-section (chapter 1) of this text.

In *Sūtra* 30 : 4, heart is stated to be the habitat (controlling organ) of six *aṅgas* (limbs) of the body, *vijñāna* (intellect), five senses, five objects of senses, *ātmā* (soul) along with its attributes, mind and objects of the mind. Most of these items are described in the above text. Others which are not directly described here are to be included under various items mentioned therein.

As the spokes of wheel are attached to its centre, and they cease to function when the centre is destroyed, similarly, vessels, etc., perish when their controller, i.e. heart gets destroyed.

In the place of '*nābhyāmarā*', there is a variant reading, viz., *nābhyāmaparā*'. This reading implies that as the placenta (*aparā*) in the

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mother's womb is connected to the umbilicus (*nābhi*) of the foetus (to provide nourishment), similarly the vessels, etc., are connected to the heart. This simile implies the connection of channels at a distance with the heart.

Senses and channels carrying *elan vitae* located at a distance from the head are also controlled by the latter. This is the implication of the simile of sun-rays and the sun.

Affliction of those far off channels by the damage to the head shows that the head is the root of these channels.

The urinary bladder is stated to be located amidst several organs, like *sthūla-guda* (rectum). This shows that the urinary bladder is the resort (*āśraya*) of all the surrounding organs.

The channels are described in the above text as *marmas*.

Actually, it is not the channels but their resorts (*mūlas*) which are the *marmas* (vital spots). Alternatively, the resorts described above refer to *śiras* (vessels) which are also described as *marmas* (*sirā-marmas*).

The term '*marma-sañjñakāni*' can also be interpreted in a different way. Channels (*srotāṃsi*) are connected to their resorts (*mūlas*) which are *marmas*, and which provide nourishment to them because of which even these channels are called *marmas* or vital organs.

Injury to Vital Organs

तेषां त्रयाणामन्यतमस्यापि भेदादाश्वेव शरीरभेदः स्यात्, आश्रयनाशादाश्रितस्यापि विनाशः; तदुपघातात्तु घोरतरव्याधिप्रादुर्भावः; तस्मादेतानि विशेषेण रक्ष्याणि बाह्याभिघाताद्वातादिभ्यश्च ।। ५ ।।

Serious injury (*bheda*) to any one of these vital organs (heart, head and urinary bladder) causes destruction of the body since the destruction of the substratum (*āśraya*) leads to the destruction of the suprastructure. Partial injury (*upaghāta*) to these vital organs leads to affliction by serious diseases. Therefore, these three vital organs should be specially protected from external injury and afflictions by *vāyu*, etc. [5]

The heart is the resort of the body because it is the abode of ten primary vessels which are responsible for the creation of the body during embryonic development.

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Ailments Caused by Injury to Vital Organs

तत्र हृद्यभिहते कासश्वासबलक्षयकण्ठशोषक्लोमाकर्षणजिह्वानिर्गममुखतालुशोषापस्मारोन्मादप्रलापचित्तनाशादयः स्युः; शिरस्यभिहते मन्यास्तम्भार्दितचक्षुर्विभ्रममोहोद्वेष्टनचेष्टानाशकासश्वासहनुग्रहमूकगद्गदत्वाक्षिनिमीलनगण्डस्पन्दनजृम्भणलालास्रावस्वरहानिवदनजिह्मत्वादीनि; बस्तौ तु वातमूत्रवर्चोनिग्रहवङ्क्षणमेहनबस्तिशूलकुण्डलोदावर्तगुल्मानिलाष्ठीलोपस्तम्भनाभिकुक्षिगुदश्रोणिग्रहादयः; वाताद्युपसृष्टानां त्वेषां लिङ्गानि चिकित्सिते सक्रियाविधीन्युक्तानि।। ६।।

Injury to the heart gives rise to cough, asthma, loss of strength, dryness of throat, *klomākarṣaṇa* (pain as if there is stretching of the *kloman* or lungs), protrution of the tongue, dryness of mouth as well as palate, epilepsy, insanity, delirium, unconsciousness, etc.

Injury to the head gives rise to *manyā-stambha* (torticollis), *ardita* (facial paralysis), *cakṣu-vibhrama* (agitation of eyes), *moha* (unconsciousness), *udveṣṭana* (cramps), *ceṣṭā-nāśa* (loss of motor activities), cough, asthma, *hanu-graha* (lock-jaw), *mūkatva* (dumbness), *gadgadatva* (lulling speech), *akṣi-nimīlana* (closure of the eye-lids), *gaṇḍa-spandana* (twitching of cheeks), *jṛmbhaṇa* (yawning), *lālā-srāva* (excessive salivation), *svara-hāni* (aphasia), *vadana-jihmatva* (twisting of the face), etc.

Injury to the urinary bladder gives rise to retention of flatus, urine as well as feces, pain in the groin, phallus as well as urinary bladder, *kuṇḍala* (spiralling spasm in the bladder), *udāvarta* (upward movement of wind in the abdomen), *gulma* (phantom tumour), *vātāṣṭhīlā* (hard tumour caused by *vāyu*), *upastambha* (spasticity of the bladder), stiffness of umbilicus, pelvis, anus as well as hips, etc.

The signs, symptoms and treatment of different varieties of the above mentioned ailments caused by the affliction of vital organs by *vāyu*, etc., are already described in (the twenty sixth chapter of) *Cikitsā*-section.

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Involvement of Vāyu in Ailments of Vital Organs

किंत्वेतानि विशेषतोऽनिलाद्रक्ष्याणि, अनिलो हि पित्तकफसमुदीरणे हेतुः प्राणमूलं च, स बस्तिकर्मसाध्यतमः, तस्मान्न बस्तिसमं किञ्चित् कर्म मर्मपरिपालनमस्ति। तत्र षडास्थापनस्कन्धान् विमाने द्वौ चानुवासनस्कन्धाविह च विहितान् बस्तीन् बुद्ध्या विचार्य महामर्मपरिपालनार्थं प्रयोजयेद्वातव्याधि-चिकित्सां च।। ७।।

These *marmas* (vital organs, viz., heart, head and urinary bladder) are to be protected from aggravated *vāyu* because it is this aggravated *vāyu* which is responsible for the excitation (aggravation) of *pitta* and *kapha*, and the *elan vitae* is dependant upon this *vāyu*. This *vāyu* is best treated by *basti* (medicated enema-therapy). Therefore, there is none other than *basti*-therapy which can safeguard the vital organs.

Therefore, after intelligent consideration, *basti*-recipes prepared of six groups of drugs for *nirūha* (vide *Vimāna* 8 : 139-144), two groups of drugs for *anuvāsana* (vide *Vimāna* 8 : 150) and therapeutic measures prescribed for the treatment of *vāta-vyādhi* (diseases caused by aggravated *vāyu* - as described in 28th chapter of *Cikitsā*-section) should be employed to protect these vital organs. [7]

Pitta and *kapha*, by themselves, are inactive. They become active only when these are excited by *vāyu*. This *vāyu* is also an independent cause of *vātika* diseases. Therefore, for protecting the vital organs from diseases, it is necessary to protect them from *vāyu* which is responsible for all their diseases.

The *prāṇa* or *elan vitae* is also dependant upon *vāyu* inasmuch as when in its normal state, it protects the *prāṇa*, and in its morbid state, it takes away life, i.e. causes death of the person. Therefore, all these vital organs should be protected from affliction by morbid *vāyu*.

Basti or enema-therapy excells all the other therapeutic measures for correcting morbid *vāyu* (vide *Sūtra* 25 : 40). While selecting the appropriate therapy (recipe), the physician should intellectually analyse the ten factors, viz., *doṣa*, *bheṣaja*, etc., as enumerated in *Vimāna* 1 : 3.

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Recipes for Treatment of Ailments of Vital Organs

भूयश्च हृद्युपसृष्टे हिङ्गुचूर्णे लवणानामन्यतमचूर्णसंयुक्तं मातुलुङ्गस्य रसेनान्येन वाऽम्लेन हृद्येन वा पाययेत्, स्थिरादिपञ्चमूलीरसः सशर्करः पानार्थं, बिल्वादिपञ्चमूलरससिद्धा च यवागूः, हृद्रोगविहितं च कर्म; मूर्ध्नि तु वातोपसृष्टेऽभ्यङ्गस्वेदनोपनाहस्नेहपाननस्तःकर्मावपीडनधूमादीनि; बस्तौ तु कुम्भीस्वेदः, वर्तयः, श्यामादिभिर्गोमूत्रसिद्धो निरूहः, बिल्वादिभिश्च सुरासिद्धः, शरकाशेक्षुदर्भगोक्षुरकमूलशृतक्षीरैश्च त्रपुसैर्वारुखराश्वाबीज-यवर्षभकवृद्धिकल्कितो निरूहः, पीतदारुसिद्धतैलेनानुवासनं, तैल्वकं च सर्पिर्विरेकार्थं, शतावरीगोक्षुरकबृहतीकण्टकारिकागुडूचीपुनर्नवोशीरमधु-कद्विसारिवालोध्रश्रेयसीकुशकाशमूलकषायक्षीरचतुर्गुणं बलावृषर्षभकखरा-श्वोपकुञ्चिकावत्सकत्रपुसैर्वारुबीजशितिवारकमधुकवचाशतपुष्पाश्मभेद-कवर्षाभूमदनफलकल्कसिद्धं तैलमुत्तरबस्तिर्निरूहो वा शुद्धस्निग्धस्विन्नस्य बस्तिशूलमूत्रविकारहर इति।। ८।।

If the heart gets afflicted by *vāyu*, then [in addition to *basti*] the following therapeutic measures should be employed :

(1) The patient should drink the juice of *mātuluṅga* or any other sour drink which is pleasing to the heart by adding the powder of *hiṅgu* and any of the salts;

(2) Decoction of *kṣudra-pañca-mūla* (*śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*) added with sugar may also be used as a drink;

(3) He may take *yavāgū* (thick gruel) prepared with the decoction of *bilva, śyonāka, gambhārī, pāṭalā* and *gaṇikārikā*; and

(4) He may be given other therapeutic measures prescribed for the treatment of heart-diseases (vide *Cikitsā* 26 : 81-103).

If the head is afflicted by *vāyu*, then [in addition to *basti*], the following therapeutic measures should be employed :

(1) Massage;

(2) Fomentation;

(3) Application of hot poultices;

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(4) Unctuous potions;

(5) Inhalation therapy;

(6) *Avapīḍa* (administration of medicinal powders through the nostrils by applying pressure); and

(7) Smoking and such other therapies.

If the urinary bladder is afflicted by *vāyu*, then the following therapeutic measures should be employed :

(1) *Kumbhī-sveda* (a type of fomentation therapy -- vide *Sūtra* 14 : 56-58);

(2) *Vartīs* (medicated suppositories);

(3) *Nirūha* type of enema prepared of cow's urine boiled with *śyāmā*, etc., (*śyāmā, trivṛt, caturaṅgula, tilvaka, mahā-vṛkṣa, saptalā, śaṅkhinī, dantī* and *dravantī* -- vide *vimāna* 8 : 136);

(4) [*Nirūha* type of enema] prepared of alcohol boiled with *bilva*, etc. (*bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā*) or root of *bilva, trivṛt, deva-dāru, yava, kola* and *kulattha* (vide *Siddhi* 7 : 11);

(5) *Nirūha-basti* containing milk boiled with the root of *śara, kāśa, ikṣu, darbha* and *gokṣura*, and added with the paste of *trapusa, ervāruka,* seeds of *kharāśva* (*aja-modā*), *yava, ṛṣabhaka* and *vṛddhi*;

(6) *Anuvāsana-basti* with the oil cooked with *pīta-dāru* (*dāru-haridrā*; some physicians interprete this term "*pīta-dāru-siddha-tailena*" as oil extracted from the heart-wood of *saralā*);

(7) Purgation with *Tilvaka-sarpis* (vide *Kalpa* 9 : 14-15);

(8) *Uttara-basti* (urethral douche) or *nirūha* with the medicated oil cooked by adding the following :

(i) Decoction of *śatāvarī, gokṣuraka, bṛhatī, kaṇṭakārikā, guḍūcī, punarnavā, uśīra, madhuka,*

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two varieties of *sārivā* (*ananta-mūla* and *śyāmā*), *lodhra, śreyasī* (*rāsnā*) and roots of *kuśa* as well as *kāśa*;

(ii) The above mentioned decoction and four times of milk; and

(iii) Paste of *balā, vṛṣa* (*vāsaka*), *ṛṣabhaka, kharāśva* (*ajamodā*), *upakuñcikā* (*kṛṣṇa-jīraka*), *vatsaka,* seeds of *trapusa* as well as *ervāruka, śitivāraka* (*śāliñca*), *madhuka, vacā, śata-puṣpā, aśma-bhedaka* (*pāṣāṇa-bheda*), *varṣābhū* and *madana-phala*; and

(9) After the patient has been subjected to purification, oleation and fomentation therapies, *nirūha-basti* should be given for the cure of pain in the bladder and urinary disorders. [8]

Summary of Topics

भवन्ति चात्र श्लोकाः-

हृदये मूर्ध्नि बस्तौ च नृणां प्राणाः प्रतिष्ठिताः।
तस्मात्तेषां सदा यत्नं कुर्वीत परिपालने।। ९।।
आबाधवर्जनं नित्यं स्वस्थवृत्तानुवर्तनम्।
उत्पन्नार्तिविघातश्च मर्मणां परिपालनम्।। १०।।

Thus, it is said :

Prāṇa or *elan vitae* of human beings is located in the heart, head and urinary bladder. Therefore, efforts should always be made to protect these vital organs.

For the protection of these vital organs (heart, head and urinary bladder), measures to be taken are as follows :

(1) Avoidance of the cause of injury to these organs;

(2) Constantly following the rules and regimens for *svastha-vṛtta* (maintenance of positive health and prevention of diseases); and

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(3) Prompt treatment of the diseases of these vital organs immediately after their onset. [9-10]

Description of Additional Diseases of Vital Organs

अत ऊर्ध्वं विकारा ये त्रिमर्मीये चिकित्सिते।
न प्रोक्ता मर्मजास्तेषां कांश्चिद्वक्ष्यामि सौषधान्।। ११।।

Hereafter, I (refers to Lord Ātreya) shall describe some diseases along with their treatment, originating from these vital organs which were left out in the twenty sixth chapter of *Cikitsā*-section. [11]

Apatantraka and Apatānaka (Convulsions)

क्रुद्धः स्वैः कोपनैर्वायुः स्थानादूर्ध्वं प्रपद्यते।
पीडयन् हृदयं गत्वा शिरः शङ्खौ च पीडयन्।। १२।।
धनुर्वन्नमयेद्गात्राण्याक्षिपेन्मोहयेत्तथा ।
(नमयेच्चाक्षिपेच्चाङ्गान्युच्छ्वासं निरुणद्धि च।।)
कृच्छ्रेण चाप्युच्छ्वसिति स्तब्धाक्षोऽथ निमीलकः।। १३।।
कपोत इव कूजेच्च निःसंज्ञः सोऽपतन्त्रकः।
दृष्टिं संस्तभ्य संज्ञां च हत्वा कण्ठेन कूजति।। १४।।
हृदि मुक्ते नरः स्वास्थ्यं याति मोहं वृते पुनः।
वायुना दारुणं प्राहुरेके तमपतानकम्।। १५।।

There are specific causative factors for the aggravation of *vāyu*. Being provoked by these factors, it spreads upwards from its natural habitat to affect the heart. From there, it moves further upwards to the head, and afflicts the two temples (*śaṅkha*). As a result of this, it bends the limbs [of the body] like a bow, causes convulsions and fainting. [After causing bending and convulsions, it obstructs the expiration] as a result of which the patient breaths with difficulty, and his eyes remain either fixed or closed. He breaths like the cooing of a pigeon, and becomes unconscious. This ailment is called *Apatantraka.*

This aggravated *vāyu*, after keeping the eyes fixed and causing unconsciousness, makes the patient to moan with

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cooing sound coming out of the throat. After the affliction of the heart by this *vāyu* is relieved, the patient's normal health is restored. If the affliction of the heart by this aggravated *vāyu* takes place again, then the patient becomes unconscious again. Some physicians call this serious ailment caused by the [exceedingly] aggravated *vāyu* (in association of aggravated *kapha*) as *Apatānaka*. [12-15]

Apatānaka is only a form of *Apatantraka*. The latter is caused by *vāyu* alone while the former is caused by the aggravated *vāyu* in association with aggravated *kapha*.

According to Jatūkarṇa, both these types of *Apatantraka* are caused by *vāyu* and *kapha*.

An alternative interpretation is : *apatantraka* is of two different and distinct types; one is caused by *vāyu* which is described in the above text as *apatantraka;* and the other caused by *vāyu* in association with *kapha* which is described above as *apatānaka.* [There seems to be some printing errors in Cakrapāṇi's commentary.]

Suśruta has described this ailment *apatantraka* under the group of *vāta-vyādhis*.

Treatment of Apatantraka and Apatānaka

श्वसनं कफवाताभ्यां रुद्धं तस्य विमोक्षयेत्।
तीक्ष्णैः प्रधमनैः संज्ञां तासु मुक्तासु विन्दति।। १६।।
मरिचं शिग्रुबीजानि विडङ्गं च फणिञ्झकम्।
एतानि सूक्ष्मचूर्णानि दद्याच्छीर्षविरेचनम्।। १७।।
तुम्बुरूण्यभया हिङ्गु पौष्करं लवणत्रयम्।
यवक्वाथाम्बुना पेयं हृद्ग्रहे चापतन्त्रके।। १८।।
हिङ्ग्वम्लवेतसं शुण्ठीं ससौवर्चलदाडिमम्।
पिबेद्वातकफघ्नं च कर्म हृद्रोगनुद्धितम्।। १९।।
शोधना बस्तयस्तीक्ष्णा न हितास्तस्य कृत्स्नशः।
सौवर्चलाभयाव्योषैः सिद्धं तस्मै घृतं हितम्।। २०।।

If the breath of the patient gets obstructed by *kapha* and *vāyu*, this obstruction should be corrected, and he should be made capable of breathing freely by the administration of strong *pradhamana* therapy (a type of inhalation therapy for

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which drugs in powder form are blown into the nostrils). After the obstruction to breath (in the channel carrying consciousness) is removed, then the patient gets back consciousness.

For *śiro-virecana* (elimination of morbid matter from the head), fine powder of *marica*, seeds of *śigru*, *viḍaṅga* and *phaṇijjhaka* should be used.

If there is *hṛd-graha* (cardiac spasm) in *apatantraka*, then the patient should be given the powder of *tumburu*, *abhayā*, *hiṅgu*, *puṣkara-mūla* and three types of salt along with the decoction of *yava* (prepared according to the method prescribed for *Ṣaḍaṅga-pānīya* — vide commentary on *Cikitsā* 3 : 145-147).

The patient suffering from cardiac spasm and *apatantraka* should take the decoction of *hiṅgu*, *amla-vetasa*, *śuṇṭhī*, *sauvarcala* and *dāḍima*.

Therapies which alleviate *vāyu* and *kapha*, and which are curative of heart-diseases are useful in the treatment of *apatantraka* (including *apatānaka*).

Cleansing enema (*nirūha-basti*) of strong nature should not be given in full quantity (but can be given in small dose because in large dose they may provoke aggravated *vāyu*).

For such patients (of *apatantraka* and *apatānaka*), medicated ghee prepared by cooking with *sauvarcala*, *abhayā*, *śuṇṭhī*, *pippalī* and *marica* is useful. [16-20]

Etiology, Pathogenesis, Signs and Treatment of Tandrā

मधुरस्निग्धगुर्वन्नसेवनाच्चिन्तनाच्छ्रमात् ।
शोकाद्व्याध्यनुषङ्गाच्च वायुनोदीरितः कफः।। २१।।
यदाऽसौ समवस्कन्द्य हृदयं हृदयाश्रयान्।
समावृणोति ज्ञानादींस्तदा तन्द्रोपजायते।। २२।।
हृदये व्याकुलीभावो वाक्चेष्टेन्द्रियगौरवम्।
मनोबुद्ध्यप्रसादश्च तन्द्राया लक्षणं मतम्।। २३।।

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कफघ्नं तत्र कर्तव्यं शोधनं शमनानि च।
व्यायामो रक्तमोक्षश्च भोज्यं च कटुतिक्तकम्।। २४।।

When the *vāyu* provoked by the intake of sweet, unctuous and heavy food, by worry, fatigue and grief, and by constant suffering from chronic diseases, incites *kapha*, then this *kapha* getting lodged in the heart occludes the *jñāna* (knowledge), etc., located therein giving rise to *tandrā* (drowsiness).

Uncomfortable feeling (*vyākulī-bhāva*) in the heart, heaviness (slowness) of the speech, action and functioning of the senses, and absence of clarity of the mind as well as intellect — these are the signs and symptoms of *tandrā* (drowsiness).

This ailment should be treated with the following :

(1) Therapies for the alleviation and elimination of *kapha*;

(2) Physical exercise;

(3) Blood-letting; and

(4) Food, ingredients of which are pungent and bitter in taste. [21-24]

[Cakrapāṇi, while referring to the above mentioned verses, does not accept them as authentic. According to him, these verses are mentioned only in some editions of this work.]

Enumeration of Urinary Diseases

मूत्रौकसादो जठरं कृच्छ्रमुत्सङ्गसंक्षयौ।
मूत्रातीतोऽनिलाष्ठीला वातबस्त्युष्णमारुतौ।। २५।।
वातकुण्डलिका ग्रन्थिर्विड्घातो बस्तिकुण्डलम्।
त्रयोदशैते मूत्रस्य दोषास्ताँल्लिङ्गतः शृणु।। २६।।

The following are the thirteen urinary diseases :

(1) *Mūtraukasāda* (passage of dense urine);

(2) *Mūtra-jaṭhara* (abdominal swelling because of urinary retention);

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(3) *Mūtra-kṛcchra* (dysuria);

(4) *Mūtra-utsaṅgraha* (retention of residual urine in the bladder);

(5) *Mūtra-saṅkṣaya* (anuria);

(6) *Mūtrātīta* (delayed micturition);

(7) *Vātāṣṭhīlā* (stone-like growth in the bladder because of aggravated *vāyu*);

(8) *Vāta-basti* (affliction of bladder by *vāyu*);

(9) *Uṣṇa-māruta* (burning micturition);

(10) *Vāta-kuṇḍalikā* (spiral movement of *vāyu* in the bladder);

(11) *Granthi* (tumour);

(12) *Viḍ-vighāta* (fecal fistula); and

(13) *Basti-kuṇḍala* (spiral distension of bladder).

The signs of the above mentioned urinary disorders will be described hereafter which you (addressed by Lord Ātreya to Agniveśa) may listen to. [25-26]

These urinary disorders are different from the various types of *mūtra-kṛcchra* described in *Cikitsā* 26 : 32-58. [One of the ailments described in the above text is "*mūtra-kṛcchra*" whereas this term "*mūtra-kṛcchra*" represents the group name of all the urinary disorders described in *Cikitsā* 26 : 32-58].

Pathology, Signs and Treatment of Mūtraukasāda

पित्तं कफो द्वावपि वा बस्तौ संहन्यते यदा।
मारुतेन तदा मूत्रं रक्तं पीतं घनं सृजेत्।। २७।।
सदाहं श्वेतसान्द्रं वा सर्वैर्वा लक्षणैर्युतम्।
मूत्रौकसादं तं विद्यात् पित्तश्लेष्महरैर्जयेत्।। २८।।

When, either *vāyu, pitta* or *kapha,* or both *pitta* and *kapha* in the bladder get condensed, then the patient voids urine which is either red or yellow, thick and associated with burning sensation. The urine may also be white and dense,

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and may be associated with all the signs (relating to all the three *doṣas*).

This ailment is called *Mūtraukasāda*, and it should be treated with therapies for the alleviation of *pitta* and *kapha*. [27 - 28]

Mūtraukasāda is of three types, viz., caused by *vāyu* and *kapha*, or by *vāyu* and *pitta* or by all the three *doṣas*. The colour of the urine becomes red or yellow because of *pitta*, and white because of *kapha*.

In this ailment, *vāyu* gets aggravated because of *āvaraṇa* (occlusion) by *pitta* and *kapha*. This type of ailment gets corrected by the alleviation of occluding *doṣas*. Hence, the treatment prescribed here is for correcting *pitta* and *kapha*.

Etiology, Signs and Treatment of Mūtra-jaṭhara

विधारणात् प्रतिहतं वातोदावर्तितं यदा।
पूरयत्युदरं मूत्रं तदा तदनिमित्तरुक्।। २९।।
अपक्तिमूत्रविट्सङ्गैस्तन्मूत्रजठरं वदेत्।
मूत्रवैरेचनीं तत्र चिकित्सां संप्रयोजयेत्।। ३०।।
हिङ्गुद्विरुत्तरं चूर्णं त्रिमर्मीये प्रकीर्तितम्।
हन्यान्मूत्रोदरानाहमाध्मानं गुदमेढ्रयोः।। ३१।।

When becuase of the suppression of the manifested urge for micturition, the retarded flow of urine moves upwards, and fills up the abdominal cavity, then the patient suffers from the following :

(1) Pain without any appreciable reason;

(2) Indigestion; and

(3) Retention of urine and stool.

This condition is called *Mūtra-jaṭhara* (abdominal swelling by urine).

The patient should be treated with diuretics. *Hiṅgu-dviruttara-cūrṇa* (or *Dviruttara-hiṅgvādi-cūrṇa*) described in *Cikitsā* 26 : 20 cures *mūtrodara* (or *mūtra-jaṭhara*), constipation and distension of rectum as well as phallus. [29 - 31]

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Mūtra-virecanīya or diuretic drugs are described in *Sūtra* 4 : 15.

Etiology of Mūtra-kṛcchra

मूत्रितस्य व्यवायात्तु रेतो वातोद्धतं च्युतम्।
पूर्वं मूत्रस्य पश्चाद्वा स्रवेत् कृच्छ्रं तदुच्यते।। ३२।।

If a person having the manifested urge for urination enters into sexual act, the semen excited by *vāyu* gets discharged from its location. It is ejaculated before or after the passage of urine which is painful, and it is called *Mūtra-kṛcchra*. [32]

The disease entity (group) called *Mūtra-kṛcchra* described in *Cikitsā* 26 : 32-44 has different signs and symptoms; and therefore, different from the one with same name described in the above text.

Etiology and Signs of Mūtra-utsaṅga

खवैगुण्यानिलाक्षेपैः किञ्चिन्मूत्रं च तिष्ठति।
मणिसन्थौ स्रवेत् पश्चात्तदरुग्वाऽथ चातिरुक्।। ३३।।
मूत्रोत्सङ्गः स विच्छिन्नमुच्छ्रेषगुरुशेफसः।

If the urinary tract (urethra) is vitiated, then because of the spasm caused by *vāyu*, a part of the urine remains accumulated in the sphincter of glans penis. Subsequently, the residual urine [flows out with interruptions] with either severe pain or no pain from the heavy phallus. This condition is called *Mūtrotsaṅga* (dribbling of the residual urine).
[33 - $^{1}/_{2}$ 34]

Etiology and Signs of Mūtra-saṅkṣaya

वाताकृतिर्भवेद्वातान्मूत्रे शुष्यति संक्षयः।। ३४।।

If the urinary secretion gets dried up (becomes less in quantity) because of aggravated *vāyu*, then signs and symptoms of *vāyu* are manifested, and this condition is called *Mūtra-saṅkṣaya* (diminution of urine-flow). [$34^{1}/_{2}$]

Etiology and Signs of Mūtrātīta

चिरं धारयतो मूत्रं त्वरया न प्रवर्तते।
मेहमानस्य मन्दं वा मूत्रातीतः स उच्यते।। ३५।।

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The person with the habit of holding up urination for a long time, becomes incapable of passing urine immediately after the urge, and the flow of urine becomes slow. This condition is called *Mūtrātīta* (delayed urination). [35]

Etiology and Signs of Vātāṣṭhīlā

आध्मापयन् बस्तिगुदं रुद्ध्वा वायुश्चलोन्नताम्।
कुर्यात्तीव्रार्तिमष्ठीलां मूत्रविण्मार्गरोधिनीम्।। ३६।।

Vāyu causing obstruction in the bladder and rectum, and distension of these organs, produces hard tumour (*aṣṭhīlā*) which is mobile and elevated, which is exceedingly painful and which obstructs the urinary and fecal passages. [This ailment is called *Vātāṣṭhīlā*.] [36]

Etiology and Signs of Vāta-basti

मूत्रं धारयतो बस्तौ वायुः क्रुद्धो विधारणात्।
मूत्ररोधार्तिकण्डूभिर्वातबस्तिः स उच्यते।। ३७।।

In the person who habitually suppresses the manifested urge for urination, *vāyu* gets aggravated because of obstruction thereby giving rise to retention of urine, pain and itching. This ailment is called *Vāta-basti* (affliction of bladder by *vāyu*). [37]

Etiology and Signs of Uṣṇa-vāta

उष्मणा सोष्मकं मूत्रं शोषयन् रक्तपीतकम्।
उष्णवातः सृजेत् कृच्छ्राद्बस्त्युपस्थार्तिदाहवान्।। ३८।।

Vāyu, in association with *pitta*, dries up the urine. It is associated with *pitta*, and therefore, red and yellow in colour. This causes painful voiding of urine, and pain as well as burning sensation in the bladder and phallus. This is called *Uṣṇa-vāta* (affliction of urine by *vāyu* in association with *pitta*). [38]

Etiology and Signs of Vāta-kuṇḍalikā

गतिसङ्गादुदावृत्तः स मूत्रस्थानमार्गयोः।

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मूत्रस्य विगुणो वायुर्भग्नव्याविद्धकुण्डली।। ३९।।
मूत्रं विहन्ति संस्तम्भभङ्गगौरववेष्टनैः।
तीव्ररुङ्मूत्रविट्सङ्गैर्वातकुण्डलिकेति सा।। ४०।।

Because of the obstruction in the urinary passage, the vitiated *vāyu* moves upwards, and afflicts the bladder as well as urinary channel as a result of which urination takes place in broken, curved and spiral manner. This ailment is called *Vāta-kuṇḍalikā* (spiral movement of *vāyu* in bladder). It is characterised by morbidities of urinary tract like stiffness, breaking pain, heaviness, twisting, excruciating pain and retention of urine as well as feces. [39-40]

Etiology and Signs of Rakta-granthi

रक्तं वातकफाद्दुष्टं बस्तिद्वारे सुदारुणम्।
ग्रन्थिं कुर्यात् स कृच्छ्रेण सृजेन्मूत्रं तदावृतम्।। ४१।।
अश्मरीसमशूलं तं रक्तग्रन्थिं प्रचक्षते।

Blood vitiated by *vāyu* and *kapha* produces serious type of tumour in the neck of the bladder. Because of this occlusion, the patient voids urine with difficulty, and experiences pain like that which is felt because of calculi in the urinary passage. This is called *Rakta-granthi* (blood tumour in bladder).

[41 $^{1}/_{2}$ 42]

Etiology and Signs of Viḍ-vighāta

रूक्षदुर्बलयोर्वातेनोदावृत्तं शकृद्यदा।। ४२।।
मूत्रस्रोतः प्रपद्येत विट्संसृष्टं तदा नरः।
विड्गन्धं मूत्रयेत् कृच्छ्राद्विड्विघातं विनिर्दिशेत्।। ४३।।

When the feces gets occluded by *vāyu* to enter the urinary passage in an ununctuous and weak person, then he voids foul smelling urine mixed with fecal matter with difficulty. This condition is called *Viḍ-vigraha* (recto-vesical fistula).

[42 $^{1}/_{2}$ - 43]

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Etiology and Signs of Basti-kuṇḍala

द्रुताध्वलङ्घनायासादभिघातात् प्रपीडनात्।
स्वस्थानाद्बस्तिरुद्धृत्तः स्थूलस्तिष्ठति गर्भवत्।। ४४।।
शूलस्पन्दनदाहार्तो बिन्दुं बिन्दुं स्रवत्यपि।
पीडितस्तु सृजेद्धारां संस्तम्भोद्वेष्टनार्तिमान्।। ४५।।
बस्तिकुण्डलमाहुस्तं घोरं शस्त्रविषोपमम्।
पवनप्रबलं प्रायो दुर्निवारमबुद्धिभिः।। ४६।।
तस्मिन् पित्तान्विते दाहः शूलं मूत्रविवर्णता।
श्लेष्मणा गौरवं शोफः स्निग्धं मूत्रं घनं सितम्।। ४७।।
श्लेष्मरुद्धबिलो बस्तिः पित्तोदीर्णो न सिध्यति।
अविभ्रान्तबिलः साध्यो न तु यः कुण्डलीकृतः।। ४८।।
स्याद्बस्तौ कुण्डलीभूते हृन्मोहः श्वास एव च।

Because of fast-wayfaring, fasting, exhaustion, trauma and compression, the urinary bladder gets displaced upwards, and becomes enlarged to appear like a gravid uterus.

Being afflicted with colic pain, throbbing pain and burning sensation, the patient passes urine in drops. When pressed in the bladder region, the urine comes out in jet. The patient suffers from stiffness, cramps and pain. This ailment is called *Basti-kuṇḍala* (spiral distension of bladder). This is a serious condition like injury by weapons or poison. This is generally dominated by aggravated *vāyu*, and can not be handled by less intelligent physicians.

Association with vitiated *pitta*, this ailment gives rise to burning sensation, colic pain and discoloration of urine.

Association of *kapha* with this ailment gives rise to heaviness, oedema and unctuousness, density as well as white coloration of the urine.

If the urinary passage is clogged by *kapha*, and if *pitta* is aggravated, then the ailment is incurable. If the passage is not blocked or twisted, then the ailment is curable. Twisting of the bladder is characterised by cardiac distress and asthma.

[44 - $^{1}/_{2}$ 49]

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Line of Treatment of Urinary Morbidities

दोषाधिक्यमवेक्ष्यैतान् मूत्रकृच्छ्रहरैर्जयेत्।। ४९।।
बस्तिमुत्तरबस्तिं च सर्वेषामेव दापयेत्।

After ascertaining the predominance of various *doṣas* in the above mentioned urinary disorders, the patient should be treated with therapies prescribed for curing *mūtra-kṛcchra* (vide *Cikitsā* 26 : 45-58). *Basti* (medicated enema) and *uttata-basti* (urethral douche) should be administered in all the above mentioned ailments. [49 $^1/_2$ - $^1/_2$ 50]

Netra (Nozzle or Catheter)

पुष्पनेत्रं तु हैमं स्याच्छ्लक्ष्णमौत्तरबस्तिकम्।। ५०।।
जात्यश्वहनवृन्तेन समं गोपुच्छसंस्थितम्।
रौप्यं वा सर्षपच्छिद्रं द्विकर्णं द्वादशाङ्गुलम्।। ५१।।

The *netra* (nozzle or catheter) for *uttara-basti* (urethral douche) should be prepared of gold or silver, and it should be smooth. Its tip should be of the size of the flower-stalk of *jātī* or *aśvahana* (*karavīra*), and in shape it should be tapering like the cow's tail. It must have a hole in the middle which should allow a mustard seed to pass through. It should have two rings, and its length must be twelve *aṅgulas* (one *aṅgula* or finger-breadth = 3/4th of an inch approximately).

[50 $^1/_2$ - 51]

The nozzle or catheter used for giving *uttara-basti* (urethral douche) is called "*puṣpa-netra*". The therapeutic process is called "*uttara-basti*", because this type of douche (*basti*) is used through the passages located above or in the front part (*uttara*) of the anus (where normal *basti* is given). Alternatively, the term '*uttara*' means excellence. The douche given through the urethral passage has better (*uttara*) therapeutic effects for which the procedure is called "*uttara-basti*".

The tip of the catheter should be like flower-stalk of *jātī* or *aśvahana*. Hārīta has described the tip to be like the stalk of *kunda*-flower.

There should be two rings in the catheter : one at the end (base) for tying the bladder (receptacle of douche), and the other at the level of six *aṅgulas* (which is normal size of the phallus) from the tip.

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The term '*dvi-karṇam*' has a variant reading as '*tri-karṇikam*'.

Dose of Recipe for Douche

तेनाजबस्तियुक्तेन स्नेहस्यार्धपलं नयेत्।
यथावयोविशेषेण स्नेहमात्रां विकल्प्य वा।।५२।।

The nozzle or catheter should be tied to a goat's bladder containing half *pala* of the unctuous recipe which is to be administered. The exact dose in which this unctuous recipe is to be administered should be determined on the basis of the age of the patient. [52]

The dose of the recipe for urethral douche prescribed in the text, i.e. half *pala* is meant for a person who is 25 years of age above. For younger patients, the dose should be proportionately reduced commensurate with the age of the patient. This is stated in *Suśruta* : *Cikitsā* 37 : 102.

Methods of Administering Urethral Douche

स्नातस्य भुक्तस्य रसेन पयसाऽपि वा।
सृष्टविण्मूत्रवेगस्य पीठे जानुसमे मृदौ।।५३।।
ऋजोः सुखोपविष्टस्य हृष्टे मेढ्रे घृताक्तया।
शलाकयाऽन्विष्य गतिं यद्यप्रतिहता व्रजेत्।।५४।।
ततः शेफःप्रमाणेन पुष्पनेत्रं प्रवेशयेत्।
गुदवन्मूत्रमार्गेण प्रणयेदनु सेवनीम्।।५५।।
हिंस्यादतिगतं बस्तिमूने स्नेहो न गच्छति।
सुखं प्रपीडच्य निष्कम्प्यं निष्कर्षेन्नेत्रमेव च।।५६।।
प्रत्यागते द्वितीयं च तृतीयं च प्रदापयेत्।

The patient who has taken bath, who has taken food along with meat-soup or milk and who has voided stool as well as urine should be made to sit over a knee-high soft seat in a straight and comfortable position. In his erected phallus the passage of urethra should be determined with the help of a ghee smeared probe. If the probe passes through the urethra without any difficulty then the nozzle or catheter should be inserted up to the length of the phallus following the direction of perineal suture in the manner prescribed for the insertion of

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the enema-nozzle in the anus (for *basti* or medicated enema).

If the catheter is inserted beyond the prescribed limit, then it will cause injury to the bladder. If it is inserted lesser than that limit, then the unctuous recipe will not enter the bladder.

Gentle pressure should be applied over the douche-receptacle without shaking it. Thereafter, the catheter should be withdrawn. After the injected fluid has come out, the process should be repeated for the second and third time.

[53 - $^{1}/_{2}$ 57]

Retention of Douche-fluid

अनागच्छन्नुपेक्ष्यस्तु रजनीव्युषितस्य च।।५७।।
पिप्पलीलवणागारधूमापामार्गसर्षपैः ।
वार्ताकुरसनिर्गुण्डीशम्पाकैः ससहाचरैः।।५८।।
मूत्राम्लपिष्टैः सगुडैर्वर्तिं कृत्वा प्रवेशयेत्।
अग्रे तु सर्षपाकारां पश्चार्धे माषसंमिताम्।।५९।।
नेत्रदीर्घो घृताभ्यक्तां सुकुमारामभङ्गुराम्।
नेत्रवन्मूत्रनाड्यां तु पायौ चाङ्गुष्ठसंमिताम्।।६०।।
स्नेहे प्रत्यागते ताभ्यामानुवासनिको विधिः।
परिहारश्च सव्यापत् ससम्यग्दत्तलक्षणः।।६१।।

If the fluid does not come out then the physician should wait for one night. Thereafter, a *varti* (medicated suppository) should be inserted into the urethra. For this *varti, pippalī,* salt, salt, house-soot, *apāmārga, sarṣapa,* juice of *vārtāku, nirguṇḍī, śampāka* and *sahācara* should be triturated with cow's urine and sour juice. By cooking with jaggery syrup, *varti* should be prepared (cooking with jaggery syrup should be done in such a way that the suppository becomes hard and smooth. The tip of the *varti* should be of the size of a mustard seed, and the base should be of the size of a *māṣa* (black gram). The length of this *varti* should be like the *netra* (nozzle or catheter). Smeared with ghee, this tender and unbreakable suppository should be inserted into the urethra. Simutaneously,

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the suppository of the size of the thumb should be inserted into the anus of the patient.

After the return of *sneha* (unctuous recipe used for douche) by these two *vartis* or suppositories (one inserted in the urethra and the other in the anus), the patient should be given regimens which are prescribed to be given after the administration of the *anuvāsana* or unctuous type of medicated enema.

Prohibitions (*parihāra*), complications (*vyāpat*) and signs of appropriate administration (*samyak-yoga-lakṣaṇa*) of *uttara-basti* are the same as those described in respect of *anuvāsana-basti*. [58-61]

Urethral Douche for Women

स्त्रीणामार्तवकाले तु प्रतिकर्म तदाचरेत्।
गर्भासना सुखं स्नेहं तदाऽऽदत्ते ह्यपावृता।। ६२।।
गर्भं योनिस्तदा शीघ्रं जिते गृह्णाति मारुते।
बस्तिजेषु विकारेषु योनिविभ्रंशजेषु च।। ६३।।
योनिशूलेषु तीव्रेषु योनिव्यापत्स्वसृग्दरे।
अप्रस्त्रवति मूत्रे च बिन्दुं बिन्दुं स्त्रवत्यपि।। ६४।।
विदध्यादुत्तरं बस्तिं यथास्वौषधसंस्कृतम्।

In the case of a woman, this *uttara-basti* (urethral douche) should be administered during her menstrual period because [the cervix of] the uterus remains open during this time, and readily receives the unctuous fluid given in the form of douche. This therapy subdues the (local) *vāyu* as a result of which the uterus becomes capable of conception.

The douche prepared with appropriate drugs should be administered to the woman for the following ailments :

(1) Diseases of the urinary bladder;

(2) Prolapse of uterus;

(3) Excruciating pain in the uterus;

(4) Gynecic disorders;

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(5) Menorrhagia;

(6) Anuria; and

(7) Dribbling of urine. [62 - $^{1}/_{2}$ 65]

As a general rule, women should be given *uttara-basti* (urethral douche) during their menstrual period. Because of the flow of accumulated blood, the obstruction in the passage gets removed during this period. *Uttara-basti* thus becomes more effective to alleviate *vāyu* and makes the uterus suitable for conception.

Nozzles of Uttara-basti for Females

पुष्पनेत्रप्रमाणं तु प्रमदानां दशाङ्गुलम्।। ६५।।
मूत्रस्रोतःपरीणाहं मुद्गस्रोतोऽनुवाहि च।
अपत्यमार्गे नारीणां विधेयं चतुरङ्गुलम्।। ६६।।
द्व्यङ्गुलं मूत्रमार्गे तु बालायास्त्वेकमङ्गुलम्।

The *puṣpa-netra* (nozzle or catheter) for woman should be ten *aṅgulas* in length. In circumference, it should be of the size of their urethral canal. The hole in the middle of the nozzle or catheter should be spacious enough to allow the passage of the seed of *mudga* (green gram).

For giving douche in the genital organ of adult woman, the nozzle should be inserted up to four *aṅgulas* (finger breadth), and for douche in their urethral passage, it should be inserted up to two *aṅgulas*. In the case of young girls, the catheter should be inserted up to one *aṅgula* in their urethral passage. [65 $^{1}/_{2}$ - $^{1}/_{2}$ 67]

The urethra of young girls is smaller in length; hence the catheter should be inserted in their urethra only up to one *aṅguli*. Vaginal douche should not be given to young girls as their passage in their genital organ is closed.

Method of Administering Uttara-basti to Females

उत्तानायाः शयानायाः सम्यक् सङ्कोच्य सक्थिनी।। ६७।।
अथास्याः प्रणयेन्नेत्रमनुवंशगतं सुखम्।
द्विस्त्रिश्चतुरिति स्नेहानहोरात्रेण योजयेत्।। ६८।।

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बस्तौ, बस्तौ प्रणीते च वर्तिः पीनतरा भवेत्।
त्रिरात्रं कर्म कुर्वीत स्नेहमात्रां विवर्धयेत्।। ६९।।
अनेनैव विधानेन कर्म कुर्यात् पुनस्त्र्यहात्।

Uttara-basti should be given to a female when she is lying in the bed in her back with thighs lifted up and flexed. The catheter (nozzle) should be inserted comfortably in the direction of her spinal (vertibral) column. Two, three or four unctuous recipes should thus be administered into the bladder during the course of a day and night.

For women, the *varti* (suppository) to be inserted into the urethra [in the case of retention of unctuous fluid] should be thicker.

In the aforesaid manner, douching should be done for three nights by gradually increasing the dose of unctuous recipe. After a gap of three days, this douching therapy should be repeated following the above mentioned procedure.

[$67^{1}/_{2}$ - $^{1}/_{2}$ 70]

The dose of unctuous recipe to be given to a female patient for douche should be one *prasṛta* (vide *Suśruta* : *Cikitsā* 37 : 106).

Diseases of Head

अतः शिरोविकाराणां कश्चिद्भेदः प्रवक्ष्यते।। ७०।।

Hereafter we shall describe some diseases of the head (*śiro-roga*). [$70^{1}/_{2}$]

Earlier, in this chapter, the diseases of heart and urinary bladder were described. Hereafter, those of the remaining vital organ; i.e. head will be described. Some diseases of head are already discussed in *Cikitsā* 26 : 104-118. Only the remaining once will be discussed hereafter.

Śaṅkhaka

रक्तापित्तानिला दुष्टाः शङ्खदेशे विमूर्च्छिताः।
तीव्ररुग्दाहरागं हि शोफं कुर्वन्ति दारुणम्।। ७१।।
स शिरो विषवद्वेगी निरुध्याशु गलं तथा।
त्रिरात्राज्जीवितं हन्ति शङ्खको नाम नामतः।। ७२।।

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परं त्र्यहाज्जीवति चेत् प्रत्याख्यायाचरेत् क्रियाम्।
शिरोविरेकसेकादि सर्वं वीसर्पनुच्च यत्।। ७३।।

The vitiated blood, *pitta* and *kapha* interact in the region of temples to cause serious type of oedema associated with excruciating pain, burning sensation and inflammation. This disease called *Śaṅkhaka* with the velocity of poison, causes immediate obstruction in the head as well as throat leading to the death of the patient within three nights.

If the patient survives after three critical days, the physician, while appropriately informing about the difficulty in curing the patient, should administer all therapies like *śiro-virecana* and affusion including those prescribed for the treatment of *visarpa* (erysipelas). [70 $^{1}/_{2}$ - 73]

The patient suffering from *śaṅkhaka* lives only for three days because of the specific nature of the disease. [Therapies for the treatment of *visarpa* (erysipelas) are already described in the 21st chapter of *Cikitsā-sthāna.*]

Etiology, Signs and Treatment of Ardhāvabhedaka (Hemicrania)

रूक्षात्यध्यशनात् पूर्ववातावश्यायमैथुनैः।
वेगसंधारणायासव्यायामैः कुपितोऽनिलः।। ७४।।
केवलः सकफो वाऽर्धं गृहीत्वा शिरसस्ततः।
मन्याभ्रूशङ्खकर्णाक्षिललाटार्धेऽतिवेदनाम् ।। ७५।।
शस्त्रारणिनिभां कुर्यात्तीव्रां सोऽर्धावभेदकः।
नयनं वाऽथवा श्रोत्रमतिवृद्धो विनाशयेत्।। ७६।।
चतुःस्नेहोत्तमा मात्रा शिरःकायविरेचनम्।
नाडीस्वेदो घृतं जीर्णं बस्तिकर्मानुवासनम्।। ७७।।
उपनाहः शिरोबस्तिर्दहनं चात्र शस्यते।
प्रतिश्याये शिरोरोगे यच्चोद्दिष्टं चिकित्सितम्।। ७८।।

The *vāyu* gets aggravated by the intake of un-unctuous ingredients, food in excess quantity, intake of food before the previous meal is digested, exposure to the easterly wind as well as fog, excessive sexual indulgence, suppression of the

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manifested natural urges, fatigue and physical work. This *vāyu*, alone or in association with *kapha* causes seizure of half of the head thereby causing excruciating pain in the sterno-mastoid region, eye-brows, temples, ears, eyes and fore-head of that half side. The patient experiences excruciating pain as if caused by the injury of a weapon or *araṇi* (churning rod used for producing sacrificial fire), i.e. by the fire itself. This ailment is called *Ardhāvabhedaka* (hemicrania). If exceedingly aggravated, this ailment may even destroy the eyes and ears of the patient.

For the tratment of this ailment the therapies to be used are as follows :

(1) *Catuḥ-sneha* (four types of fat, viz., oil, ghee, muscle-fat and bone-marrow) to be taken in heavy dose;

(2) *Śiro-virecana* (inhalation therapy for the elimination of morbid matter from the head);

(3) *Kāya-virecana* (emesis and purgation therapy for the elimination of morbid matter from the body);

(4) *Nāḍī-sveda* (a type of fomentation therapy - vide *Sūtra* 14 : 43);

(5) *Jīrṇa-ghṛta* (ten years old ghee);

(6) *Nirūha* and *anuvāsana* types of medicated enema;

(7) *Upanāha* (application of hot poultice);

(8) *Śiro-basti* (keeping medicated oil over the head with the help of a cap with open ends);

(9) *Dahana* (cauterization); and

(10) Therepies prescribed for *pratiśyāya* and *śiro-roga* (head-diseases). [74-78]

Araṇi is the wood which is used for bringing forth fire by churning. This term also implies fire which is produced by its churning.

Some scholars consider *upanāha* as a form of *śiro-basti* which is called '*māstiṣka*'. According to them, for *māstiṣka,* eight *aṅgulas* of

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cloth, and for *śiro-basti* twelve *aṅgulas* of cloth should be used. The method of *śiro-basti* is described in *Śālākya-tantra.* Accordingly, for this therepay a piece of leather having twelve *aṅgulas* of breadth, and of the size of the head to be tied to the head which is already covered with a strip of cloth around up to the level of ears with the help of a string or cloth. The junction between the cap and the scalp should be sealed by the application of the paste of *māṣa* (black-gram). Into this cap, luke-warm medicated oil should be poured so that the space in the cap gets filled up to the upper limit of the hair in the head. This medicated oil should be prepared of drugs appropriate to the disease. Over the scalp inside the cap, this medicated oil should be retained till the face and the nose become greasy, and till completion of the counting of 10000, 8,000 or 6,000 number for *vāyu, pitta* and *kapha* respectively. During this process, the shoulder of the patient should be kneaded (massaged). This *śiro-basti* therapy should be given along with medicated oil for a maximum period of seven days.

In another text of *Śālākya-tantra,* the process of *śiro-basti* is described in a slightly different manner. A piece of leather of the size of the head, and eight finger breadth in size should be surrounded over the head, and the junction between the leather and the head should be sealed with the paste of *māṣa* (black gram). The patient should sit motionless, and the leather cap should be filled with luke-warm medicated oil. It should be retained over the head for one or half *yāma* (one *yāma* = three hours) till the pain of the head caused by *vāyu* is relieved.

The patient is stated to be given *dahana* (cauterization) therapy. As described in other texts, this therapy should be administered in the two *aṅgulas* area between the forehead and the temple with the help of *śara-kāṇḍa* (stem of *śara*), etc.

Etiology, Signs and Treatment of Sūryāvarta

सन्धारणादजीर्णाद्यैर्मस्तिष्कं रक्तमारुतौ।
दुष्टौ दूषयतस्तच्च दुष्टं ताभ्यां विमूर्च्छितम्।। ७९।।
सूर्योदयेंऽशुसंतापाद्भवं विष्यन्दते शनैः।
ततो दिने शिरःशूलं दिनवृध्द्या विवर्धते।। ८०।।
दिनक्षते ततः स्त्याने मस्तिष्के संप्रशाम्यति।
सूर्यावर्तः स तत्र स्यात् सर्पिरौत्तरभक्तिकम्।। ८१।।
शिरःकायविरेकौ च मूर्ध्ना स्नेहधारणम्।
जाङ्गलैरुपनाहश्च घृतक्षीरैश्च सेचनम्।। ८२।।

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बर्हितित्तिरिलावादिशृतक्षीरोत्थितं घृतम्।
स्यान्नावनं जीवनीयक्षीराष्टगुणसाधितम्।। ८३।।

Because of *vega-sandhāraṇa* (suppression of the manifested natural urges), *ajīrṇa* (indigestion), etc., *rakta* (blood) and *māruta* (*vāyu*) being vitiated, afflict the *mastiṣka* (cerebrum). The cerebrum, thus gets interacted by these two vitiated factors. Because of the effect of sun-rays after the sun-rise, the morbid matter in the cerebrum which is in liquid form gets exudated slowly. Therefore, during day time, as the day advances, the headache becomes more and more intense. When the sun goes down, the liquefied morbid material becomes thicker and thicker in density in the brain as a result of which the headache gets alleviated. This ailment is called *Sūryāvarta*.

For the cure of this ailment, therapeutic measures to be given are as follows :

(1) The patient should be given a potion of ghee after meals;

(2) *Śiro-virecana* (inhalation therapy for the elimination of morbid matter from the head);

(3) *Kāya-virecana* (emesis and purgation for the elimination of morbid matter from the body);

(4) *Śiro-basti* should be given with three types of fat (oil, ghee and muscle-fat);

(5) *Upanāha* (hot poultice) prepared of the meat of animals inhabiting arid zone forests;

(6) Sprinkling of the head with ghee and milk; and

(7) Milk should be boiled with the meat of peacock, partridge, quails, etc., and ghee should be taken out of this milk. This ghee should be added with eight times of milk, and the paste of drugs belonging to *Jīvanīya*-group (vide *Sūtra* 4 : 9 : 1). With this

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medicated ghee, *nāvana* (inhalation therapy) should be given to the patient. [79-83]

The characteristic signs and symptoms of *sūryāvarta* are manifested because of *vikṛti-viṣama-samavāya* (manifestation of new symptoms not connected with the causative factors) of *doṣas* and *dhātus*. The headache increases by the heat of sun-rays, and not by other forms of heat like that of the fire because of former's *prabhāva* (specific action).

Etiology, Signs and Symptoms of Ananta-vāta

(उपवासातिशोकातिरूक्षशीताल्पभोजनैः ।)
दुष्टा दोषास्त्रयो मन्यापश्चाद्घाटासु वेदनाम्।। ८४।।
तीव्रां कुर्वन्ति सा चाक्षिभ्रूशङ्खेष्ववतिष्ठते।
स्पन्दनं गण्डपार्श्वस्य नेत्ररोगं हनुग्रहम्।। ८५।।
सोऽनन्तवातस्तं हन्यात् सिरार्कावर्तनाशनैः।

Because of fasting, excessive grief, intake of food which is exceedingly ununctuous and cold, and intake of extremely small quantity of food, all the three *doṣas* (*vāyu, pitta* and *kapha*) get vitiated to cause acute pain in the sterno-mastoid region (*manyā* = region of jugular veins), in the back and at the back of the neck (*ghāṭā*). This pain (thereafter) gets localised in the eyes, eye-brows and temples. The patient gets throbbing pain in the sides of cheeks, eye-diseases and lock-jaw. This ailment is called *Ananta-vāta*. It can be cured by venesection and by therapies prescribed for the treatment of *sūryāvarta* (vide verse nos. 79-83). [84 - $^{1}/_{2}$ 86]

In other works, this ailment is described as *Anyato-vāta*.

Etiology, Signs and Treatment of Śiraḥ-kampa

वातो रूक्षादिभिः क्रुद्धः शिरःकम्पमुदीरयेत्।। ८६।।
तत्रामृताबलारास्नामहाश्वेताश्वगन्धकैः ।
स्नेहस्वेदादि वातघ्नं शस्तं नस्यं च तर्पणम्।। ८७।।

Being aggravated by the use of ununctuous and such other ingredients, *vāyu* causes trembling of the head (*śiraḥ-kampa*). For the treatment of this ailment, oleation, fomentation, *nasya* (inhalation) and *tarpaṇa* (demulcent nasal

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medication) therapies prepared with *vāyu*-alleviating drugs like *amṛtā*, *balā*, *rāsnā*, *mahā-śvetā* and *aśvagandhā* are useful. [86 $^{1}/_{2}$ - 87]

Importance of Inhalation Therapy

नस्तकर्म च कुर्वीत शिरोरोगेषु शास्त्रविद्।
द्वारं हि शिरसो नासा तेन तद् व्याप्य हन्ति तान्।। ८८।।

For the treatment of the diseases of the head, the expert physician should administer *nasta-karma* (inhalation therapy) because the nose is the gateway of the head. The inhalation therapy given through the nasal passage spreads into the different parts of the head, and cures diseases located there. [88]

Varieties of Inhalation Therapy

नावनं चावपीडश्च ध्मापनं धूम एव च।
प्रतिमर्शश्च विज्ञेयं नस्तःकर्म तु पञ्चधा।। ८९।।
स्नेहनं शोधनं चैव द्विविधं नावनं स्मृतम्।
शोधनः स्तम्भनश्च स्यादवपीडो द्विधा मतः।। ९०।।
चूर्णस्याध्मापनं तद्धि देहस्त्रोतोविशोधनम्।
विज्ञेयस्त्रिविधो धूमः प्रागुक्तः शमनादिकः।। ९१।।
प्रतिमर्शो भवेत् स्नेहो निर्दोष उभयार्थकृत्।
एवं तद्रेचनं कर्म तर्पणं शमनं त्रिधा।। ९२।।

Inhalation therapy is of five types as follows :

(1) *Nāvana* (inhalation of drugs in the form of nasal drops). This is of two types, viz., *snehana* (drops for oleation) and *śodhana* (drops for elimination of morbid material from the head);

(2) *Avapīḍa* (insufflation of drugs in thin paste form through the nasal passage). This is of two types, viz., *śodhana* (insufflation of drugs for the elimination of morbid matter) and *stambhana* (insufflation of drugs for the stoppage of excessive secretion);

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(3) *Dhmāpana* (insufflation of drugs in powder form through the nasal passage). It cleanses the channels of the body;

(4) *Dhūma* (inhalation of drugs in the form of smoke): It is of three types, viz., *śamana* or *prāyogika* (smoke used for the alleviation of *doṣas*), *snaihika* (smoke used for oleation of different parts of the head), and *virecana* (smoke used for the elimination of morbid material from the head); and

(5) *Prati-marśa* (application of medicated oil in the nostrils). It is harmless and it serves both the purposes (i.e. oleation and elimination of morbid matter from the head).

The inhalation therapy (as a whole) can be reclassified into three categories as follows :

(a) *Recana* (which causes elimination of morbid matter from the head);

(b) *Tarpaṇa* (which provides nourishment to the organs located in the head). It includes *snehana* action also; and

(c) *Śamana* (which alleviates the aggravated *doṣas* in the head). It includes *stambhana* action also.

[89-92]

Inhalation therapy is useful for the treatment of diseases in the head. Therefore, its different types of action are described in the above text. In *Suśruta* (*Cikitsā* 40 : 21) excluding *dhūma* (inhalation of drugs in the form of smoke), the inhalation therapy is described to be of five types as follows :

(1) *Nasya*;

(2) *Śiro-virecana*;

(3) *Prati-marśa*;

(4) *Avapīḍa*; and

(5) *Pradhamana*.

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Śiro-virecana type of inhalation therapy is included in the *nāvana* type of *Caraka*. *Nāvana* type of inhalation therapy as described in the above text is of two types, viz., *snehana* (which causes oleation) and *śodhana* (which causes elimination of *doṣas* from the head). It is this latter variety of *nāvana* which is similar to *śiro-virecana* variety described in *Suśruta*.

In the above text, *avapīḍa* type of inhalation therapy is described to be of two types, viz., *śodhana* (which causes elimination of morbid matter) and *stambhana* (which causes arrest of excessive secretion). This latter variety also includes *śamana* type (which causes alleviation of *doṣas*).

Avapīḍa implies the administration of thin paste, etc., by insufflation. The paste of drugs like *saindhava* and *pippalī* given for the elimination of morbid matter is also included under this category.

Ādhmāpana type of inhalation therapy is stated to cleanse the channels of the head. By implication, this type of inhalation therapy also comes under the category of *śiro-virecana* (which eliminates morbid matter from the head).

Dhūma (inhalation therapy applied in the form of smoke) includes *śamana* or *prāyogika* (which causes alleviation of *doṣas*), *snaihika* (which causes oleation) and *vairecanika* (which causes elimination of *doṣas*) types. It does not include the smoking through the mouth.

The characteristic features of *pratimarśa* type will be explained later (vide verse no. 117).

All the actions of inahalation therapy are classified into three categories, viz., *recana*, *tarpaṇa* including *snehana*, and *śamana* including *stambhana*. All the other effects of inhalation therapy described in other texts are to be included under these three categories.

Inhalation Therapy for Different Ailments

स्तम्भसुप्तिगुरुत्वाद्याः श्लैष्मिका ये शिरोगदाः।
शिरोविरेचनं तेषु नस्तःकर्म प्रशस्यते।। ९३।।
ये च वातात्मका रोगाः शिरःकम्पार्दितादयः।
शिरसस्तर्पणं तेषु नस्तःकर्म प्रशस्यते।। ९४।।
रक्तपित्तादिरोगेषु शमनं नस्यमिष्यते।
ध्मापनं धूमपानं च तथा योग्येषु शस्यते।। ९५।।
(दोषादिकं समीक्ष्यैव भिषक् सम्यक् च कारयेत्।)

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In the case of head-diseases associated with stiffness, numbness, heaviness, etc., caused by the aggravated *kapha*, inhalation therapy of *śiro-virecana* type (which causes elimination of morbid matter from the head) is useful.

In *śiraḥ-kampa* (trembling of head), *ardita* (facial paralysis), etc., caused by aggravated *vāyu*, inhalation therapy which causes *tarpaṇa* (nourishment by oleation) of the head is useful.

In diseases like *rakta-pitta* (an ailment characterised by bleeding from different parts of the body) and such other diseases, *śamana* (which causes alleviation of *doṣas*) type of inhalation therapy is useful.

Inhalation therapy through *ādhmāpana* (insufflation) and *dhūma-pāna* (inhalation of smoke) should be used in appropriate conditions.

After appropriate examination of *doṣas*, etc., involved in the causation of the disease, the physician should administer suitable inhalation therapy. [93 - $^{1}/_{2}$ 96]

In *Sūtra* 5 : 27-31, patients suitable for the administration of inhalation therapy by *dhūma-pāna* (inhalation of smoke) are already described.

Inhalation therapy administered by *ādhmāpana* (insufflation) is already stated in the verse no. 91 to cleanse the channels of circulation. Therefore, patients having diseases like *abhinyāsa* (fever leading to coma) and *apasmāra* (epilepsy) which need cleansing of channels are to be given this type of therapy.

Drugs for Virecana and Tarpaṇa Nasya

फलादिभेषजं प्रोक्तं शिरसो यद्विरेचनम्।। ९६।।
तच्चूर्णं कल्पयेत्तेन पचेत् स्नेहं विरेचनम्।
यदुक्तं मधुरस्कन्धे भेषजं तेन तर्पणम्।। ९७।।
साधयित्वा भिषक् स्नेहं नस्तः कुर्याद्विधानवित्।

In *Vimāna* 8:151 (seven categories of) drugs whose fruits, (leaves, roots, rhizomes, flowers, exudates and barks)

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are useful for *śiro-virecana* are described. These drugs can be used for *pradhmana* and *avapīḍa* types of inhalation therapy in powder form. Oil may be cooked by adding the powder of these drugs. This medicated oil may be used for inhalation therapy of *virecana* type (which eliminates the morbid matter from the head).

Oil may be cooked by adding drugs belonging to *Madhura-skandha* (sweet group) described in *Vimāna* 8:139. This medicated oil may also be used for *tarpaṇa* type of inhalation therapy. [96-97]

Method of Administering Avapīḍa Nasya

प्राक्सूर्ये मध्यसूर्ये वा प्राक्कृतावश्यकस्य च।। ९८।।
उत्तानस्य शयानस्य शयने स्वास्तृते सुखम्।
प्रलम्बशिरसः किञ्चित् किञ्चित् पादोन्नतस्य च।। ९९।।
दद्यान्नासापुटे स्नेहं तर्पणं बुद्धिमान् भिषक्।
अनवाक्शिरसो नस्यं न शिरः प्रतिपद्यते।। १००।।
अत्यवाक्शिरसो नस्यं मस्तुलुङ्गेऽवतिष्ठति।
अत एवंशयानस्य शुद्ध्यर्थं स्वेदयेच्छिरः।। १०१।।
संस्वेद्य नासामुन्नम्य वामेनाङ्गुष्ठपर्वणा।
हस्तेन दक्षिणेनाथ कुर्यादुभयतः समम्।। १०२।।
प्रणाड्या पिचुना वाऽपि नस्तःस्नेहं यथाविधि।
कृते च स्वेदयेद्भूय आकर्षेच्च पुनः पुनः।। १०३।।
तं स्नेहं श्लेष्मणा साकं तथा स्नेहो न तिष्ठति।
स्वेदेनोत्क्लेशितः श्लेष्मा नस्तःकर्मण्युपस्थितः।। १०४।।
भूयः स्नेहस्य शैत्येन शिरसि स्त्यायते ततः।
श्रोत्रमन्यागलाद्येषु विकाराय स कल्पते।। १०५।।
ततो नस्तःकृते धूमं पिबेत् कफविनाशनम्।
हितान्नभुङ्निवातोष्णसेवी स्यान्नियतेन्द्रियः।। १०६।।
विधिरेषोऽवपीडस्य कार्यः प्रध्मापनस्य तु।

In the morning or noon time, after the patient has completed his daily acts of ablutions, he should be made to lie comfortably in supine position on a well spread bed with his

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head slightly hanging down, and legs slightly raised. A wise physician should give him *tarpaṇa* (nourishing) type of medicated oil through his nostrils.

If the head is not kept in a lower position then the recipe for inhalation therapy will not reach the desired destination in the head. If the head is lowered in excess then the recipe gets lodged in the brain (*mastuluṅga*). Therefore, the patient should maintain the aforesaid position while lying down.

As a preparatory measure for cleaning, fomentation therapy should be applied over the head of the patient. Thereafter, the physician with the thumb of his left hand should raise the tip of the nose, and with his right hand, should appropriately pour the recipe of medicated oil through a *praṇāḍī* (pipette) or *picu* (cotton swab) in equal quantities in each of the nostrils.

After this, fomentation therapy should be applied over the head once again, and the recipe of medicated oil along with *śleṣmā* (phlegm or mucous matter) should be drained out frequently till no trace of medicated oil is left out.

Because of fomentation, the *śleṣmā* (mucous matter) gets excited and by the administration of inhalation therapy, it gets dislodged. If a part of the medicated oil is left behind then because of its cooling effect, the localised mucous matter gets concealed in the head. This may give rise to diseases of the ears, *manyā* (sides of the neck), throat, etc.

After the administration of the inhalation therapy, the patient should be given *dhūma-pāna* (smoking therapy) which is curative of *kapha*.

The patient should take wholesome food, and stay in a warm apartment free from draught. He should observe sensual restraint.

This is the procedure to be followed for the administration of *Avapīḍa* and *Ādhmāpana* types of *nasya*. [$98^{1}/_{2}$-$^{1}/_{2}107$]

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Avapīḍa type of inhalation therapy is stated to be given both in the morning and during midday. During summer season, it should be done during the morning hours, and during winter season, it should done during the midday.

Pradhamana Type of Inhalation Therapy

तत् षडङ्गुलया नाडच्या धमेच्चूर्णं मुखेन तु।। १०७।।
विरिक्तशिरसं तूष्णं पाययित्वाऽम्बु भोजयेत्।
लघु त्रिष्वविरुद्धं च निवातस्थमतन्द्रितः।। १०८।।
विरेकशुद्धो दोषस्य कोपनं यस्य सेवते।
स दोषो विचरंस्तत्र करोति स्वान् गदान् बहून्।। १०९।।
यथास्वं विहितां तेषु क्रियां कुर्याद्विचक्षणः।
अकालकृतजातानां रोगाणामनुरूपतः।। ११०।।

As per *pradhamana* type of inhalation therapy, the recipe in powder form should be blown by the physician through his mouth into the nostrils of the patient with the help of a tube which is six *aṅgulas* in breadth. After the morbid matter is eliminated from the head of the patient, the vigilant physician should make him to drink warm water and give him food ingredients of which are light and in harmony with all the three *doṣas*. Thereafter, the patient should be made to stay in a draught-free house.

After the body is cleansed of morbid matter, intake of unwholesome (*doṣa*-aggravating) regimen makes the aggravated *doṣas* to circulate all over the body giving rise to several diseases peculiar to that *doṣas*. In that case, the wise physician should administer therapeutic measures specifically required for the same aggravated *doṣa*. Complication arising out of untimely administration of inhalation therapy should be treated on the same line specifically suggested for each of these complications. [107 $^{1}/_{2}$ - 110]

Complications Arising Out of Kapha, and Their Treatment

अजीर्णे भोजने भुक्ते तोये पीतेऽथ दुर्दिने।
प्रतिश्याये नवे स्नाते स्नेहपानेऽनुवासने।। १११।।

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नावनं स्नेहनं रोगान् करोति श्लैष्मिकान् बहून्।
तत्र श्लेष्महरः सर्वस्तीक्ष्णोष्णादिर्विधिर्हितः।। ११२।।

Several *kaphaja* type of ailments are manifested if *snehana* (oleating) type of inhalation therapy is administered in the following conditions :

(1) During indigestion;

(2) After the intake of food;

(3) After drinking water;

(4) In a cloudy day;

(5) During coryza of recent origin;

(6) After bath;

(7) After the intake of *sneha* (potion of ghee); and

(8) After an *anuvāsana* (unctuous) type of enema.

For the treatment of such ailments all the *kapha*-alleviating therapeutic measures containing ingredients which are *tīkṣṇa* (sharp), hot, etc., are useful. [111-112]

Complications Caused by Vāyu, and Their Treatment

क्षामे विरेचिते गर्भे व्यायामाभिहते तृषि।
वातो रूक्षेण नस्येन क्रुद्धः स्वाञ्जनयेद्गदान्।। ११३।।
तत्र वातहरः सर्वो विधिः स्नेहनबृंहणः।
स्वेदादिः, स्याद्घृतं क्षीरं गर्भिण्यास्तु विशेषतः।। ११४।।

Several *vātika* type of ailments are manifested by the aggravated *vāyu* if *rūkṣa* (ununctuous) type of inhalation therapy is administered in the following conditions :

(1) If the patient is emaciated;

(2) If the patient has taken purgation therapy;

(3) If the patient (woman) is pregnant;

(4) If the patient is afflicted with hard work; and

(5) If the patient is thirsty.

For the treatment of these ailments, all the *snehana*

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(oleation), *bṛṃhaṇa* (nourishing), *svedana* (fomentation) and such other therapies which alleviate *vāyu* are useful. In the case of pregnant woman, ghee and milk should be specially given. [113-114]

Timira and its Treatment

ज्वरशोकातितप्तानां तिमिरं मद्यपस्य तु।
रूक्षैः शीताञ्जनैर्लेपैः पुटपाकैश्च साधयेत्।। ११५।।

Inhalation therapy given to a patient who is exceedingly afflicted with fever as well as grief, and who is alcoholic gives rise to *timira* (cataract). For the treatment of this *timira*, the patient should be given *śītāñjana, lepa* (application of ointment over the eyes) and *puṭa-pāka* (juice of the paste of herbs covered with mud and cooked over fire) with ununctuous ingredients. [115]

The term '*śītāñjana*' means '*srotoñjana*'. It is also interpreted as the collyrium prepared of bitter drugs. According to *Śālākya-tantra, añjana* or collyrium is of three types as follows :

(1) *Lekhana* (which scrapes out morbid matter from the eyes). It is generally prepared of drugs having pungent, sour and saline tastes, and such other drugs;

(2) *Ropaṇa* (which helps in the healing of ulcers). It is prepared of bitter drugs. Because of cooling effect, these bitter drugs help in correcting burning sensation and because of ununctuousness they help in quick healing; and

(3) *Prasādana* (which promotes eye-sight). It is prepared of drugs having sweet taste.

Puṭa-pāka (juice extracted of the paste of drugs by covering it with mud and then cooking the mud bolus over fire) is prescribed in the above text for the treatment of eye-disease. It is of two types, viz., *lekhana* (which scrapes out the morbid material from the eyes) and *śamana* (which alleviates the *doṣas*).

In *śālākya-tantra, puṭa-pāka* is described to be three types as follows :

(1) *Snehana* (which causes oleation of eyes);

(2) *Lekhana* (which scrapes out morbid material from the eyes); and

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(3) *Prasādana* (which promotes eye-sight).

Details of the methods of their administration are not described in this work because these therapies are largely used in another specialised branch of ayurveda. [*Caraka-saṃhitā* primarily deals with *Kāya-cikitsā* or internal medicicne whereas *puṭa-pāka,* etc., are largely used in *Śālākya-tantra* dealing with the treatment of diseases of the head and neck.]

Pratimarśa Type of Inhalation Therapy

स्नेहनं शोधनं द्विविधं नावनं मतम्।
प्रतिमर्शस्तु नस्यार्थं करोति न च दोषवान्।।११६।।
नस्तः स्नेहाङ्गुलिं दद्यात् प्रातर्निशि च सर्वदा।
न चोच्छिङ्घेदरोगाणां प्रतिमर्शः स दाढर्च्यकृत्।।११७।।

Nāvana type of inhalation therapy is of two types, viz., *snehana* (which causes oleation) and *śodhana* (which causes elimination of *doṣas*). *Pratimarśa* (application of oil in the nostrils) type of inhalation therapy performs both these actions, and it is harmless.

For *pratimarśa,* the the finger is dipped into the medicated oil and then applied in the inner wall of the nostrils. It is not necessary to be snuffed deeply as is done in the case of other forms of inhalation therapy. It can be used in the morning or at night in all the seasons. Even a healthy person can use this type of inhalaton therapy for promoting good function [of the organs in the head]. [116-117]

Two varieties of *nāvana* type of inhalation herapy are describe in the above text only by the way of confirming that was stated earlier. According to some physicians, in the above text, two varieties of inhalation therapy in general are described, and this includes *snehana* and *śamana* varieties of inhalation therapy described earlier.

Pratimarśa type of inhalation therapy in which only a small quantity of oil is applied can be used in all the seasons. If oil is applied in large quantity, then such a therapy can not be given in all the seasons. For the latter type, it is stated that the oil which is applied in the nostrils and which reaches the mouth with light snuffing is the appropriate quantity of *pratiarśa.* This oil used for *pratimarśa* should not be

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degultitated because it may cause irritation (lit. secretion) in the throat. The quantity in which this oil when snuffed slightly reaches the mouth is the appropriate dose.

Epilogue

तत्र श्लोकौ –

त्रीणि यस्मात् प्रधानानि मर्माण्यभिहतेषु च।
तेषु लिङ्गं चिकित्सां च रोगभेदाश्च सौषधाः।।११८।।
विधिरुत्तरबस्तेश्च नस्तःकर्मविधिस्तथा।
सव्यापद्भेषजं सिद्धौ मर्माख्यायां प्रकीर्तितम्।।११९।।

To sum up :

In this chapter dealing with the success in the treatment of three vital organs, the topics discussed are as follows :

(1) Reasons for which three organs (viz., heart, head and urinary bladder) are the most important ones; (vide verse nos. 3-5).
(2) Signs and symptoms of the afflictions of these three vital organs, and their treatment; (vide verse nos. 6-8)
(3) Varities of the diseases of these vital organs, and medicaments to be used for the treatment of these ailments; and (vide verse nos. 9-$^1/_2$ 49)
(4) Method of administration of *uttara-basti* (urethral and vaginal douche) and *nasta-karma* (inhalation therapy), their complications, and treatment of these complications. (vide verse nos. 49 $^1/_2$-117)

[118-119]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढबलसंपूरिते सिद्धिस्थाने त्रिमर्मीयसिद्धिर्नाम नवमोऽध्यायः।।९।।

Thus, ends the ninth chapter of *Siddhi-sthāna* dealing with the "Successful Treatment of Ailments Caused by the Affliction of Three Vital Organs" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - X

दशमोऽध्यायः

(EFFECTIVE RECIPES OF MEDICATED ENEMA)

Prologue

अथातो बस्तिसिद्धिं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

We shall now expound the chapter on ''Effective Recipes of Medicated Enema''.

Thus, said Lord Ātreya. [1-2]

In the previous chapter, several diseases of three vital organs are described. For the successful treatment of these diseases, effective recipes of medicated enema are being described in the present chapter.

Dialouge

सिद्धानां बस्तीनां शस्तानां तेषु तेषु रोगेषु।
शृण्वग्निवेश ! गदतः सिद्धिं सिद्धिप्रदां भिषजाम्।।३।।

O! Agniveśa, listen to the discourses on effective and useful recipes of *basti* (medicated enema) for various diseases which bestow success upon the successful physicians. [3]

Importance of Basti Therapy

बलदोषकालरोगप्रकृतीः प्रविभज्य योजिताः सम्यक्।
स्वैः स्वैरौषधवर्गैः स्वान् स्वान् रोगान्नियच्छन्ति।।४।।
कर्मान्यद्बस्तिसमं न विद्यते शीघ्रसुखविशोधित्वात्।
आश्वपतर्पणतर्पणयोगाच्च निरत्ययत्वाच्च।।५।।

Basti, if appropriately administered keeping in view the strength of the patient, *doṣas* involved in the causation of diseases, nature of the diseases, physical constitution of the patient and the properties of different groups of drugs prescribd for different diseases, cures these ailment.

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No therapeutic measure other than *basti,* cleanses the body quickly and easily, causes depletion and nourishment instantaneously, and is free from any adverse effect. [4-5]

Before the administration of *basti* (medicated enema), it is necessary to examine the ten factors already described in *Siddhi* 3 : 6. Only a few of these are described in the above text because of contextual propriety.

There are no doubt, other therapeutic measures for *apatarpaṇa* (depletion of tissues) and *santarpaṇa* (nourishment of tissues). But these effects are obtained quicker by *basti* (in comparison to others).

Superiority of Basti in Comparison to Purgation

सत्यपि दोषहरत्वे कटुतीक्ष्णोष्णादि भेषजादानात्।
दुःखोद्गारोत्क्लेशाहृद्यत्वकोष्ठरुजा विरेके स्युः।। ६।।
अविरेच्यौ शिशुवृद्धौ तावप्राप्तप्रहीनधातुबलौ।
आस्थापनमेव तयोः सर्वार्थकृदुत्तमं कर्म।। ७।।
बलवर्णहर्षमार्दवगात्रस्नेहान्नृणां ददात्याशु।

The purgation (including emesis) therapy no doubt, causes elimination of *doṣas;* but it involves intake of recipe ingredients of which are pungent, *tīkṣṇa* (sharp), hot, etc. These ingredients cause unpleasantness, eructation, nausea, cardiac discomfort *(ahṛdyatva)* and pain in the gastro-intestinal tract.

Infants have immaturity of tissues and less of strength. There is diminution of tissues and reduction in strength in old people. For both these categories of patients, viz., infants and old persons, purgation therapy is contra-indicated. *Āsthāpana* type of medicated enema can, however, be given to both these types of patients which is excellent both for the elimination of *doṣas* and nourishment of the body. This *basti*-therapy instantaneously promotes strength, complexion, sense of exhileration and tenderness as well as unctuousness of the body. [6-$^1/_2$8]

The term *'vireka'* used in the text above implies both emesis *(vamana)* and purgation *(virecana).* Generally, however, this term means 'purgation' only. If this general implication is accepted, then *vamana* (emesis) is to be excluded from the perview of the above description.

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Alternatively, its general meaning, i.e., 'purgation' only can also be taken in the present context. *Vamana* (emesis) and *basti* (medicated enema) both have entirely two different fields of action. Unlike emesis, both *basti* (enema) and purgation therapies work in the field of colon. Hence, the effects of these two therapies are compared in the above text.

Three Types of Basti

अनुवासनं निरूहश्चोत्तरबस्तिश्च स त्रिविधः।।८।।
शाखावातार्तानां सकुञ्चितस्तब्धभग्नरुग्णानाम्।
विट्सङ्गाध्मानारुचिपरिकर्तिरुगादिषु च शस्तः।।९।।
उष्णार्तानां शीताञ्छीतार्तानां तथा सुखोष्णांश्च।
तद्योग्यौषधयुक्तान् बस्तीन् संतर्क्य विनियुञ्ज्यात्।।१०।।

Basti is of three types as follows :

(1) *Anuvāsana* (enema given with oil and such other unctuous ingredients);

(2) *Nirūha* (enema given with docoction, etc., added with oil, etc.); and

(3) *Uttara-basti* (urethral and vaginal douche).

These different forms of medicated enema are useful in the following categories of ailments :

(1) Afflictions of the exterior (limbs) of the body by the aggravated *vāyu;*

(2) For those who are suffering from contractures, stiffness, fractures and pain; and

(3) Obstruction to the passage of feces, flatulence, anorexia, sawing pain, aching pain, etc.

For the patients afflicted with diseases caused by heat, cooling recipes should be used for enema. For those afflicted with diseases caused by cold, luke-warm recipes of enema should be administered.

After determining the exact requirement of the patient, enema should be administered with recipes containing appropriate, viz., hot or cold ingredients. [$8^1/_2$-10]

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Contra-indications

बस्तीन्न बृंहणीयान् दद्याद् व्याधिषु विशोधनीयेषु।
मेदस्विनो विशोध्या येऽपि नराः कुष्ठमेहार्ताः।। ११।।
न क्षीणक्षतदुर्बलमूर्च्छितकृशशुष्कदेहानाम्।
युञ्जाद्विशोधनीयान् दोषनिबद्धायुषो ये च।। १२।।

Nourishing type of medicated enema should not be given in the following conditions :

(1) Diseases requiring elimination of aggravated *doṣas;*

(2) Patients with adiposity even if they are otherwise suitable for elimination therapies; and

(3) Patients suffering from *kuṣṭha* (obstinate skin diseases including leprosy) and *meha* (obstinate urinary diseases including diabetes).

Eliminative (evacuative) type of medicated enema should not be given to the patient suffering from consumption, phthisis, weakness, fainting and emaciation as well as dryness of the body. This type of enema is also contra-indicated for patients whose life is sustained because of the retention of feces. [11-12]

The life of the patient suffering from consumption, excessive weakness, etc., is sustained by the retention of feces in the body. For them, eliminative (evacuative) type of enema, and such other measures for the purgation of stool are contra-indicated -- vide *Cikitsā* 8 : 88.

Different Types of Ingredients for Various Ailments

वाजीकरणेऽसृक्पित्तयोश्च मधुघृतपयोयुक्ताः।
शस्ताः सतैलमूत्रारनाललवणाश्च कफवाते।। १३।।
युञ्जाद्द्रव्याणि बस्तिष्वम्लं मूत्रं पयः सुरां क्वाथान्।
अविरोधाद्धातूनां रसयोनित्वाच्च जलमुष्णम्।। १४।।

For aphrodisiac effect and for the treatment of diseases caused by *rakta* (vitiated blood) and *pitta,* the recipe of enema containing honey, ghee and milk is useful.

Recipes of enema containing til oil, cow's urine, *āranāla*

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(vinegar) and salt are useful for the diseases caused by aggravated *kapha* and *vāyu*.

In the recipe of enema, ingredients like *amla* (sour drinks), cow's urine, cow's milk, alcohol and decoctions which are not antagonistic to *dhātus* (*doṣas* and tissue elements responsible for the causation of the disease) should be appropriately added. Similarly, water which is the source of nourishment *(rasa-yoni)* should be added to the recipe when it is warm. [13-14]

As a general rule, honey is added to a recipe of enema, it is specifically mentioned here because, for aphrodisiac effect, etc., honey should be added in a higher quantity. It also shows that honey is an essential ingredient in such recipes.

Such of the ingredients like *amla* (sour drinks) as are not antagonistic to *dhātus* (*doṣas* and tissue elements which are responsible for the causation of the disease) should be added, and those which are antagonistic to these *dhātus* should be excluded.

Water is the source matter for nourishment, and it promotes the nourishing effect of the ingredients added to the enema-recipe. It should be added to all the enema-recipes when it is warm. Water is not to be added to recipes directly, but it should be used for the preparation of paste, etc., of the ingredients.

[Cakrapāṇi has provided some alternative explanations about adding *jala* (water) to the enema-recipes as follows :]

(1) Eventhough, not directly mentioned elsewhere, the statement in the above text should be treated as an authority for adding water to the enema-recipe;

(2) The term *'jala'* mentioned in the above text implies liquid *(drava)*. Therefore, it provides justification for the addition of liquids *(dravas)* like *amla* (sour drink) in enema-recipes. *Amla* (sour drinks), etc., become *rasa-yoni* (source of nourishment) because of their liquid nature; and

(3) Some scholars hold the view that addition of water is essential only in *cūrṇa-bastis* (recipes for enema in powder form), because the recipe in powder form has to be used for enema only after adding liquid to it. In another text, the recipe of *Cūrṇa-basti* is described as follows :

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"The recipe containing *rāsnā, vacā, bilva, śatāhvā, elā, pūtīka, kṛṣṇā, madana-phala, dāru, kuṣṭha, saindhava,* sour liquids, warm water and oil is called *Cūrṇa-basti.* It cures colic pain".

Ingredients for Āvāpa

सुरदारुश्ताह्वैलाकुष्ठमधुकपिप्पलीमधुस्नेहाः ।
ऊर्ध्वानुलोमभागाः ससर्षपाः शर्करा लवणम्।।१५।।
आवापा बस्तीनामतः प्रयोज्यानि येषु यानि स्युः।
युक्तानि सह कषायैस्तान्युत्तरतः प्रवक्ष्यामि।।१६।।

Sura-dāru (deva-dāru), śatāhvā, elā, kuṣṭha, madhuka, pippalī, madhu (honey), *sneha* (fats like oil and ghee), drugs which are *ūrdhva-bhāga* [*hara*] (cause upward motion in gastro-intestinal tract) and which are *anuloma-bhāga* [*hara*] (cause downward motion in the gastro-intestinal tract), *sarṣapa,* sugar and salt — these are to be used (individually or all together) as *āvāpa* (ingredients which are added later to the recipe in small quantity) in recipes for enema.

From amongst these ingredients which are to be added along with what type of decoction and to which type of enema-recipe will be described later. [15-16]

Strong and Mild Enemas

चिरजातत्कठिनबलेषु व्याधिषु तीक्ष्णा विपर्यये मृदवः।
सप्रतिवापकषाया योज्यास्त्वनुवासननिरूहाः।।१७।।

For chronic, obstinate and serious type of diseases, recipes containing *prati-vāpa* (ingredients added later) and decoctions of strong acting ingredients should be used for *anuvāsana* (unctuous type of enema) and *nirūha* (evacuative type of enema). For other types of diseases (which are of recent origin, which are easily amenable to therapeutics and which are of mild nature) ingredients having only mild effects should be used. [17]

Nirūha type of enema contains both, decoctions and *āvāpa* (ingredients which are added in paste form later). Even for *anuvāsana,* decoctions are used for the preparation of medicated oil, etc., and to

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these recipes of medicated oil, *āvāpa* of *śatāhvā,* etc., are added. As it is in other texts, *pippalī, madana, kuṣṭha, śatāhvā, madhuka* and *vacā* should be taken in appropriate quantity, made to a paste, and added as *āvāpa* to the recipe for *anuvāsana* (unctuous enema).

Enema Recipes for Vāyu, Pitta and Kapha

अर्धश्लोकैरतः सिद्धान् नानाव्याधिषु सर्वशः।
बस्तीन् वीर्यसमैर्भागैर्यथार्हालोडनाञ्छृणु।।१८।।
बिल्वोऽग्निमन्थः श्योनाकः काश्मर्यः पाटलिस्तथा।
शालपर्णी पृश्निपर्णी बृहत्यौ वर्धमानकः।।१९।।
यवाः कुलत्थाः कोलानि स्थिरा चेति त्रयोऽनिले।
शस्यन्ते सचतुःस्नेहाः पिशितस्य रसान्विताः।।२०।।
नलवञ्जुलवानीरशतपत्राणि शैवलम्।
मञ्जिष्ठा सारिवाऽनन्ता पयस्या मधुयष्टिका।।२१।।
चन्दनं पद्मकोशीरं तुङ्गं ते पैत्तिके त्रयः।
सशर्कराक्षौद्रघृताः सक्षीरा बस्तयो हिताः।।२२।।
अर्कस्तथैव चालर्क एकाष्ठीला पुनर्नवा।
हरिद्रा त्रिफला मुस्तं पीतदारु कुटन्नटम्।।२३।।
पिप्पल्यश्चित्रकश्चेति त्रयस्ते श्लेष्मरोगिषु।
सक्षारक्षौद्रगोमूत्रा नातिस्नेहान्विता हिताः।।२४।।

Now, listen to the comprehensive description of effective enema-recipes for different diseases each one of which is described in half (one line) of the following verses. These recipes contain drugs which are harmoneous in potency and proportion. In addition, *āloḍanas* or *āvāpas* (ingredients which are added later to the recipe) for each group are also described.

Ingredients for Vāyu

(1) *Bilva, agni-mantha, śyonāka, kāśmarya* and *pāṭalī;*

(2) *Śāla-parṇī, prśni-parṇī, bṛhatī, kaṇṭakārī* and *vardhamānaka (eraṇḍa);* and

(3) *Yava, kulattha, kola* and *sthirā.*

These three recipes are to be used as enema for *vātika*

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diseases along with four types of fat (oil, ghee, muscle-fat and bone-marrow) and meat-soup.

Ingredients for Pitta

(1) *Nala, vañjula (vetasa), vānīra* (a type of *vetasa*), *śata-patra* and *śaivala;*

(2) *Mañjiṣṭhā, sārivā, anantā, payasyā* and *yaṣṭi-madhu;* and

(3) *Candana, padmaka, uśīra* and *tuṅga (punnāga).*

The above mentiond three recipes prepared with milk are to be used as enema for *paittika* type of diseases, along with sugar, honey and ghee.

Ingredients for Kapha

(1) *Arka, alarka (mandāra), ekāṣṭhīlā (pāṭhā)* and *punarnavā;*

(2) *Haridrā, harītakī, bibhītaka, āmalakī, musta, pīta-dāru* and *kuṭannaṭa (kaivarta-mustaka* or *tagara);* and

(3) *Pippalī* and *citraka.*

The above mentioned three recipes along with *kṣāra* (alkali preparation), honey, cow's urine and a small quantity of fat are to be used for *kaphaja* type of diseases. [18-24]

Enema-recipes for Colon-cleansing

फलजीमूतकेक्ष्वाकुधामार्गवकवत्सकाः ।
श्यामा च त्रिफला चैव स्थिरा दन्ती द्रवन्त्यपि।।२५।।
प्रकीर्या चोदकीर्या च नीलिनी क्षीरिणी तथा।
सप्तला शङ्खिनी लोध्रं फलं कम्पिल्लकस्य च।।२६।।
चत्वारो मूत्रसिद्धास्ते पक्वाशयविशोधनाः।
(व्यस्तैरपि समस्तैश्च चतुर्योगा उदाहृताः।।२७।।)

The following four recipes are to be boiled with cow's urine, and used as enema for cleansing colon :

(1) *Phala, jīmūta, ikṣvāku, dhāmārgava* and *vatsaka;*

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(2) *Śyāmā, harītakī, bibhītaka, āmalakī, sthirā, dantī* and *dravantī* (a type of *dantī*);

(3) *Prakīryā (karañja), udakīrya, nīlinī (nīla-vuhnā* or *nīlāñjanikā)* and *kṣīriṇī;*

(4) *Saptalā, śaṅkhinī, lodhra* and fruit of *kampillaka.*

The four recipes illustrated above can be used separately or jointly. [25-27]

[Cakrapāṇi has interpreted the term *'kṣveḍa'* as *kṛtavedhana.* This term does not apear in the text. Perhaps he had a slightly different text.]

Enema-recipe for Promotion of Semen and Muscle-tissue

काकोली क्षीरकाकोली मुद्गपर्णी शतावरी।
विदारी मधुयष्ट्याह्वा शृङ्गाटककशेरुके।।२८।।
आत्मगुप्ताफलं माषाः सगोधूमा यवास्तथा।
जलजानूपजं मांसमित्येते शुक्रमांसलाः।।२९।।

The following (four) enema-recipes help in the promotion of semen and muscle-tissue :

(1) *Kākolī, kṣīra-kākolī, mudga-parṇī* and *śatāvarī;*

(2) *Vidārī, madhu-yaṣṭī, śṛṅgāṭaka* and *kaśeruka;*

(3) Fruit (seed) of *ātma-guptā, māṣa, godhūma* and *yava;* and

(4) Meat of aquatic and marshy land inhabiting animals.

[28-29]

Enema-recipe for Astringent Action

जीवन्ती चाग्निमन्थश्च धातकीपुष्पवत्सकौ।
प्रग्रहः खदिरः कुष्ठं शमी पिण्डीतक्को यवाः।।३०।।
प्रियङ्गू रक्तमूली च तरुणी स्वर्णयूथिका।
वटाद्याः किंशुकं लोध्रमिति सांग्राहिका मताः।।३१।।

The following (four) enema-recipes help in producing astringent action :

(1) *Jīvantī, agni-mantha,* flower of *dhātakī,* and *vatsaka;*

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(2) *Pragraha, khadira, kuṣṭha, śamī, piṇḍītaka (madana-phala)* and *yava;*

(3) *Priyaṅgu, rakta-mūlī (samaṅgā), taruṇī (ārāma-taruṇī)* or *nava-mallikā* and *svarṇa-yūthikā;* and

(4) *Vaṭa,* etc., (trees having latex), *kiṃśuka* and *lodhra.*

[30-31]

Enema-recipes for Arresting Excessive Secretion

परिस्त्रावे शृतं क्षीरं सवृक्षीरपुनर्नवम्।
आखुपर्णिकया वाऽपि तण्डुलीयकयुक्तया।।३२।।

The following (two) enema-recipes arrest excessive secretion from the body :

(1) Milk boiled with *vṛścīra* and *punarnavā;* and

(2) Milk boiled with *ākhu-parṇī* and *taṇḍulīyaka.*

[32]

Enema-recipes for Burning-syndrome

कालङ्कतककाण्डेक्षुदर्भपोटगलेक्षुभिः ।
दाहघ्नः सघृतक्षीरो द्वितीयश्चोत्पलादिभिः।।३३।।

The following enema-recipes cure *dāha* (burning syndrome) :

(1) Milk or ghee cooked with *kālaṅkataka, kāṇḍekṣu (bṛhadikṣu),* and *darbha, poṭagala (hoggala)* and *ikṣu;* and

(2) Milk or ghee cooked with *utpala* and such other drugs (flowers of aquatic plants like *nalina* and *saugandhika).* [33]

Enema-recipes for Sawing Pain

कर्बुदाराढकीनीपविदुलैः क्षीरसाधितैः।
बस्तिः प्रदेयो भिषजा शीतः समधुशर्करः।।३४।।
परिकर्ते तथा वृन्तैः श्रीपर्णीकोविदारजैः।
(देयो बस्तिः सुवैद्यैस्तु यथावद्विदितक्रियैः।।३५।।)

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Milk cooked with *karbudāra, āḍhakī, nīpa* and *vidula (vetasa)* should be cooled, and added with honey as well as sugar. The physician should give enema with this recipe to cure *parikartikā* (sawing pain).

A wise and expert physician should give the enema of milk cooked with the stalks of *śrī-parṇī* and *kovidāra* which is cooled, and added with honey as well as sugar to cure *parikartikā* (sawing pain) [34-35]

Enema-recipe for Gripping Pain

बस्तिः शाल्मलिवृन्तानां क्षीरसिद्धो घृतान्वितः।
हितः प्रवाहणे तद्वद्वेष्टैः शाल्मलिकस्य च।। ३६।।

Milk should be cooked with the stalks of *śālmali*, and added with ghee. Giving enema with this recipe cures *pravāhaṇa* (gripping pain).

Similarly, milk should be cooked with the gum of *śālmali*, and added with ghee. Giving enema with this recipe cures *pravāhaṇa* (gripping pain). [36]

Enema-recipe for Correcting Over-action of Basti

अश्वावरोहिकाकाकनासाराजकशेरुकैः ।
सिद्धाः क्षीरेऽतियोगे स्युः क्षौद्राञ्जनघृतैर्युताः।। ३७।।
न्यग्रोधाद्यैश्चतुर्भिश्च तेनैव विधिना परः।

For correcting the complications caused by over-action (*ati-yoga*) of *basti* (medicated enema), the following two recipes for enema are useful :

(1) Milk boiled with *aśvāvarohikā (aśva-gandhā, aśva-karṇa* or *ikṣuraka*), *kāka-nāsā* and *rāja-kaśeruka*, and added with honey, *rasāñjana* (*dāru-haridrā ghana-kvātha*) and ghee; and

(2) Milk boiled with *nyagrodha*, (*udumbara, aśvattha* and *plakṣa*), and added with honey, *rasāñjana* and ghee. [37 - $^{1}/_{2}$ 38]

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Jatūkarṇa has interpreted the plant '*aśvāvarohikā*' as '*aśva-karṇa*'.

Enema-recipe for Correcting Haemorrhage

बृहती क्षीरकाकोली पृश्निपर्णी शतावरी।। ३८।।
काश्मर्यबदरीदूर्वास्तथोशीरप्रियङ्गवः ।
जीवादाने श्रृतौ क्षीरे द्वौ घृताञ्जनसंयुतौ।। ३९।।
बस्ती प्रदेयौ भिषजा शीतौ समधुशर्करौ।
गोऽव्यजामहिषीक्षीरैर्जीवनीययुतैस्तथा ।। ४०।।
शशैणदक्षमार्जारमहिषाव्यजशोणितैः ।
सद्यस्कैर्मृदितैर्बस्तिर्जीवादाने प्रशस्यते।। ४१।।

For arresting haemorrhage, the following (three) recipes of enema are useful :

(1) Milk boiled with *bṛhatī, kṣīra-kākolī, pṛśni-parṇī* and *śatāvarī,* and added with ghee, *añjana* (*dāru-haridrā ghana-kvātha*), honey and sugar. This should be administered when cool;

(2) Milk boiled with *kāśmarya, badarī, dūrvā, uśīra* and *priyaṅgu,* and added with ghee, *añjana*, honey and sugar. This should be administered when cool; and

(3) Milk of cow, sheep, goat or buffalo should be added with the paste of *Jīvanīya*-group of drugs and the fresh blood of rabbit, deer, cock, cat, buffalo, sheep or goat. [38 $^{1}/_{2}$ - 41]

[Cakrapāṇi's commentary on the above text indicates that he had different reading of the text].

Enema-recipes for Rakta-pitta and Prameha

मधूकमधुकद्राक्षादूर्वाकाश्मर्यचन्दनैः ।
तेनैव विधिना बस्तिर्देयः सक्षौद्रशर्करः।। ४२।।
मञ्जिष्ठासारिवानन्तापयस्यामधुकैस्तथा ।
शर्कराचन्दनद्राक्षामधुधात्रीफलोत्पलैः ।
रक्तपित्ते, प्रमेहे तु कषायः सोमवल्कजः।। ४३।।

The recipe containing *madhūka, madhuka, drākṣā, dūrvā, kāśmarya* and *candana* should be prepared in the above

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mentioned manner by adding honey and sugar. This medicated enema [is useful for the treatment for *rakta-pitta* (an ailment characterised by bleeding from different parts of the body).]

Following the above mentioned procedure, enema should be prepared of *mañjiṣṭhā, sārivā, anantā, payasyā, madhuka, śarkarā* (sugar), *candana, drākṣā, madhu* (honey), fruit of *dhātrī* and *utpala* which is useful for the treatment of *rakta-pitta.*

For *prameha* (obstinate urinary disorders including diabetes), enema with the decoction of *soma-valka* is useful. [42-43]

Enema-recipe for Other Ailments

गुल्मातिसारोदावर्तस्तम्भसङ्कुचितादिषु ।
सर्वाङ्गैकाङ्गरोगेषु रोगेष्वेवंविधेषु च।। ४४।।
यथास्वैरौषधैः सिद्धान् बस्तीन् दद्याद्विचक्षणः।
पूर्वोक्तेन विधानेन कुर्वन् योगान् पृथग्विधान्।। ४५।।

For *gulma* (phantom tumour), *atisāra* (diarrhoea), *udāvarta* (upward movement of wind in abdomen), *stambha* (stiffness of limbs), *saṅkucita* (contraction of limbs), *sarvāṅga-roga* (paralysis of the whole body), *ekāṅga-roga* (paralysis of one limb) and for such other diseases, an expert physician should give *basti* (medicated enema) of effective recipes containing different types of drugs appropriate to each of these conditions prepared according to the methods described before. [44 - 45]

Epilogue

तत्र श्लोकाः-
त्रिकास्त्रयोऽनिलादीनां चतुष्काश्चापरे त्रयः।
पक्वाशयविशुद्ध्यर्थं वृष्याः सांग्राहिकास्तथा।। ४६।।
परिस्रावे तथा दाहे परिकर्ते प्रवाहणे।
सातियोगे मतौ द्वौ द्वौ जीवादाने तथा त्रयः।। ४७।।
द्वौ रक्तपित्ते मेहे च एकः त्रिंशच्च सप्त ते।
सुलभाल्पौषधक्लेशा बस्तयो गुणवत्तमाः।। ४८।।

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To sum up :

In this chapter, thirty seven excellent recipes containing small number of ingredients which are easily available and which have less of adverse effects are described as follows :

(1-3) Three recipes of enema for *vātika* diseases; [vide verse no.s 19-20]

(4-6) Three recipes of enema for *paittika* diseases; [vide verse nos 21-22]

(7-9) Three recipes of enema for *kaphaja* diseases; [vide verse nos. 23-24]

(10-13) Four recipes of enema for cleansing the colon; [vide verse nos. 25-27]

(14-17) Four recipes of enema for the promotion of virility (including those for promotion of seminal power); [vide verse nos. 28-29]

(18-21) Four recipes of enema with astringent effect; [vide verse nos. 30-31]

(22-23) Two recipes of enema for arresting excessive secretion; [vide verse no. 32]

(24-25) Two recipes of enema for curing burning syndrome; [vide verse no. 33]

(26-27) Two recipes of enema for curing sawing pain; [vide verse nos. 34-35]

(28-29) Two recipes of enema for curing gripping pain; [vide verse nos. 36]

(30-31) Two recipes of enema for correcting over-action (*ati-yoga*) of *basti* (medicated enema therapy); [vide verse nos. 37 - $^{1}/_{2}$ 38]

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(32-34) Three recipes of enema for arresting haemorrhage;

[vide verse nos. 38 $^{1}/_{2}$-41]

(35-36) Two recipes of enema for correcting *rakta-pitta* (an ailment characterised by bleeding from different parts of the body); and

[vide verse nos. 42-43]

(37) One recipe of enema for correcting *meha* (obstinate urinary diseases including diabetes).

[vide verse no. 43] [46-48]

[The term '*ekatriṃśat*' is in a compound form (as printed in *Nirṇaya Sāgara* Press edition of 1941). It should correctly be read as "*ekaḥ triṃśat*" or "*ekastriṃśat*". This seems to be an editorial error, and we have corrected the text.]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढ-
बलसंपूरिते सिद्धिस्थाने बस्तिसिद्धिर्नाम
दशमोऽध्यायः ।। १० ।।

Thus, ends the tenth chapter of *Siddhi*-section dealing with "Effective Recipes of Medicated Enema" of Agniveśa's work as redacted by Caraka, and because of its non-availability supplemented by Dṛḍhabala.

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CHAPTER - XI

एकादशोऽध्यायः

(DETERMINATION OF APPROPRIATE DRUGS FOR ENEMA & ITS VETERINARY DOSAGE)

Prologue

अथातः फलमात्रासिद्धिं व्याख्यास्यामः।। १।।
इति ह स्माह भगवानात्रेयः।। २।।

We shall now expound the chapter dealing with the "Determination of Appropriateness of Medicaments, etc., for Enema, and its Veterinary Dosage to Achieve Success."

Thus, said Lord Ātreya. [1-2]

In the previous chapter of this section, use of different types of fruits for enema were described. The therapeutic efficacy of these fruits for specific diseases will be described in this chapter. Besides, the dose of enema for different types of animals has not been described earlier. This will also be described in this chapter.

Description of enema for animals, viz., elephants, etc., is not within the scope of this text. Still the description in this chapter implies that *basti* (medicated enema) therapy is useful even for the ailments of animals, in addition to human beings.

Seminar to Resolve Disputes

भगवन्तमुदारसत्त्वधीश्रुतिविज्ञानसमृद्धमत्रिजम् ।
फलबस्तिवरत्वनिश्चये सविवादा मुनयोऽभ्युपागमन्।। ३।।
भृगुकौशिकाकाप्यशौनकाः सपुलस्त्यासितगौतमादयः।
कतमत् प्रवरं फलादिषु स्मृतमास्थापनयोजनास्विति।। ४।।

To resolve the dispute over the most useful ingredients from amongst *madana-phala,* etc., for *āsthāpana-basti* (evacuative enema), and to determine the excellence of enema with these *madana-phala,* etc., in specific ailments, sages like Bhṛgu, Kauśika, Kāpya, Śaunaka, Pulastya and Asita Gautama

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came to Lord Ātreya who is richly endowed with liberal mind, wisdom, memory and mundane knowledge. [3-4]

In the verse nos. 3-14, a historical fact, viz., the seminar which was held to discuss the relative merits of different ingredients for *basti*-therapy is described in this text of *saṃhitā* (compilations) in order to prove the authenticity (respectability) of the statements made here.

Opinion of Śaunaka of Excellence of Jīmūtaka

कफपित्तहरं वरं फलेष्वथ जीमूतकमाह शौनकः।

Śaunaka said, "Amongst the fruits, *Jīmūtaka* is the foremost in efficacy (for medicated enema) because of its effect to eliminate *kapha* and *pitta*". [$^{1}/_{2}$ 5]

In *Kalpa* section (vide *Kalpa* 2 : 4) *jīmūtaka* is described to eliminate all the three *doṣas*. However, from the above statement it appears to have the effect of eliminating both the *kapha* and *pitta*.

Opinion of Vāmaka on Excellence of Kaṭu-tumbī

मृदुवीर्यतयाऽभिनत्ति तच्छकृदित्याह नृपोऽथ वामकः।। ५।।
कटुतुम्बममन्यतोत्तमं वमने दोषसमीरणं च तत्।

The King Vāmaka said, "Because of low potency this (fruit of *Jīmūtaka*) is less effective in disintegrating and voiding of stool. On the other hand, *Kaṭu-tumbī* which is the best as emetic should be considered to be excellent because of its action to eliminate the *doṣas* (through enema)".

[$5^{1}/_{2}$ - $^{1}/_{2}$ 6]

Opinion of Gautama on Excellence of Dhāmārgava

तदवृष्यमशैत्यतीक्ष्णताकटुरौक्ष्यादिति गौतमोऽब्रवीत्।। ६।।
कफपित्तनिबर्हणं परं स च धामार्गवमित्यमन्यत्।

Gautama said, "(*Kaṭu-tumbī*) is anaphrodisiac (*avṛṣya*) because of its hot, sharp, pungent and ununctuous effects. *Dhāmārgava* which is excellent for eliminating *kapha* and *pitta* may be considered to be the best for *basti* (medicated enema)." [$6^{1}/_{2}$ - $^{1}/_{2}$ 7]

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Opinion of Baḍiśa on Excellence of Kuṭaja

तदमन्यत वातलं पुनर्बडिशो ग्लानिकरं बलापहम्।। ७।।
कुटजं प्रशशंस चोत्तमं न बलघ्नं कफपित्तहारि च।

Baḍiśa said, "It (*dhāmārgava*) is the aggravator of *vāyu*, it causes depression (*glāni*), and it reduces strength (for which it is not suitable for *basti* or enema). On the other hand, *Kuṭaja* should be considered as excellent [for enema] because it does not reduce strength, and it alleviates *kapha* as well as *pitta*."

[7 $^{1}/_{2}$ - $^{1}/_{2}$ 8]

Opinion of Kāpya on Excellence of Kṛta-vedhana

अतिविज्जलमौर्ध्वभागिकं पवनक्षोभि च काप्य आह तत्।। ८।।
कृतवेधनमाह वातलं कफपित्तं प्रबलं हरेदिति।

Kāpya said, "It (*kuṭaja*) is very viscid, it causes elimination of *doṣas* through the upward tract (emesis), and it causes aggravation of *vāyu* (*pavana-kṣobhi*) [for which it is not suitable for *basti* or enema]. On the other hand, *Kṛta-vedhana* which is *vātala* (promoter of *vāyu*) and which (instantaneously) eliminates excessively aggravated *kapha* and *pitta* (is the best drug for *basti* or medicated enema)" [8$^{2}/_{4}$ - $^{2}/_{4}$ 9]

Refutation by Bhadra-śaunaka

तदसाध्विति भद्रशौनकः कटुकं चातिबलघ्नमित्यपि।। ९।।

Bhadra-śaunaka said, "The statement [regarding the utility of *Kṛta-vedhana* in enema therapy] is not correct because it is pungent, and it reduces strength in excess. [9$^{2}/_{4}$]

The intention of mentioning the different opinions of sages (in the aforesaid verse nos. 3-9) is to highlight the good effects as well as shortcomings of different drugs for being used in enema therapy.

Ātreya's Concluding Statement

इति तद्वचनानि हेतुभिः सुविचित्रणि निशम्य बुद्धिमान्।
प्रशशंस फलेषु निश्चयं परमं चात्रिसुतोऽब्रवीदिदम्।। १०।।
फलदोषगुणान् सरस्वती प्रति सर्वैरपि सम्यगीरिता।
न तु किंचिददोषनिर्गुणं गुणभूयस्त्वमतो विचिन्त्यते।। ११।।

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इह कुष्ठहिता गरागरी हितमिक्ष्वाकु तु मेहिने मतम्।
कुटजस्य फलं हृदामये प्रवरं कोठफलं च पाण्डुषु।।१२।।
उदरे कृतवेधनं हितं, मदनं सर्वगदाविरोधि तु।
मधुरं सकषायतिक्तकं तदरूक्षं सकटूष्णविज्जलम्।।१३।।
कफपित्तहृदाशुकारि चाप्यनपायं पवनानुलोमि च।
फलनाम विशेषतस्त्वतो लभतेऽन्येषु फलेषु सत्स्वपि।।१४।।

Having heard to the (above mentioned) interesting statements advanced with reasoning, the Wise Teacher Ātreya admired the efforts of the speakers, and thereafter, delivered the final judgement regarding the best among the fruits for enema as follows :

In your statements, all of you have appropriately described the beneficial effects and shortcomings of different fruits [for use in enema therapy]. There is no drug which is absolutely free from shortcomings or which is absolutely free from good effects. Therefore, we should, (while selecting the appropriate drug for enema), think of a drug which possesses more of good attributes [for a particular ailment].

In the present context (of *basti* or medicated enema), *jīmūtaka* (*garāgarī*) is useful for the treatment of *kuṣṭha* (obstinate skin diseases including leprosy); *kaṭu-tumbī* (*ikṣvāku*) is for *meha* (obstinate urinary diseases including diabetes); fruit of *kuṭaja* for heart-diseases; *koṭha-phala* (*dhāmārgava*) is for *pāṇḍu* (anemia); and *kṛta-vedhana* is useful for *udara* (obstinate abdominal diseases including ascites).

Madana-phala is, however, not contra-indicated in any disease. It is sweet and slightly astringent as well as bitter in taste. It is not ununctuous, and slightly pungent, hot and viscid. It eliminates *kapha* and *pitta*, it acts (eliminates *doṣas*) instantaneously, it is harmless, and it causes downward movement of *vāyu*. Therefore, the term '*phala*' (lit. fruit) specifically indicates *madana-phala* (fruit of *madana*) even

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though there are several other fruits which are used in medicine. [10-14]

There are several other fruits (*phala*) which are used in medicine. But when the term '*phala*' without any prefix is mentioned in the text, it simply implies *madana-phala*, and no other fruit (like the one of *jīmūtaka*), because of its therapeutic efficacy.

Query About Action of Basti

गुरुणेति वचस्युदाहृते मुनिसङ्घेन च पूजिते ततः।
प्रणिपत्य मुदा समन्वितः सहितः शिष्यगणोऽनुपृष्टवान्।। १५।।
सर्वकर्मगुणकृद्गुरुणोक्तो बस्तिरूर्ध्वमथ नैति नाभितः।
नाभ्यधो गुदमतः स शरीरात् सर्वतः कथमपोहति दोषान्।। १६।।

The above statement of the Teacher was duely honoured by the assembly of sages. Thereafter, all the disciples bowed before Him with happiness and enquired about the following :

The Teacher has described the *basti* (medicated enema) to possess actions and attributes for curing all the diseases. But it does not reach above the level of umbilicus because the rectum through which it is administered is located below this umbilicus. Then, how is it possible for *basti* (medicated enema) to eliminate morbid material (*doṣas*) from all over the body ? [15-16]

Basti is described to be *sarva-guṇa-karma-kṛt*, i.e. to possess all the attributes and actions. By implication, *basti* can eliminate all *doṣas* like other therapies, viz., *vamana* or emesis. Alternatively, it can produce effects like *laṅghana* (lightening) and *bṛṃhaṇa* (nourishing), and it has the attributes to promote strength and *agni* (power of digestion and metabolism).

Preceptor's Reply

तद्गुरुरब्रवीदिदं शरीरं तन्त्रयतेऽनिलः सङ्गविघातात्।
केवल एव दोषसहितो वा स्वाशयगः प्रकोपमुपयाति।। १७।।
तं पवनं सपित्तकफविद्कं शुद्धिकरोऽनुलोमयति बस्तिः।
सर्वशरीरगश्च गदसंघस्तत्प्रशमात् प्रशान्तिमुपयाति।। १८।।

The Preceptor replied as follows :

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The body is sustained by *vāyu* because of its ability to cause detachment (*vighāta*) of any adhesion (*saṅga*). *Vāyu*, alone or along with other *doṣas* (generally) gets aggravated in its own habitat (i.e. colon). *Basti* (medicated enema), by its purificatory action, causes downward movement of that *vāyu* along with *pitta*, *kapha* and feces. Because of the alleviation of this *vāyu*, all the diseases pervading the whole body get alleviated. [17-18]

[Interpretation of the term '*vighātāt*' in Cakrapāṇi's commentary seems to suffer from some editorial defect.]

Vāyu generally gets aggravated in its own habitat, i.e. colon. This is the base of *vāyu* which may also get aggravated elsewhere in the body. Since *basti* or medicated enema causes alleviation of this basic *vāyu* (located in the colon or *pakvāśaya*), other connected *vāyus* elsewhere in the body get automatically alleviated. This is already explained by the citation of the simile of destruction of a tree by cutting its root (vide *Siddhi* 2 : 16). This explains the cure of all the diseases of the body by simply correcting the *vāyu* located in its basic habitat, i.e. colon.

In *Siddhi* 7 : 64, *basti* is described to draw out all the *doṣas* from the foot to the head by its *vīrya* (potency). This is described in the above text in accordance with the query of disciples.

Enema Therapy for Animals

अथाधिगम्यार्थमखण्डितं धिया गजोष्ट्रगोश्वाव्यजकर्मरोगनुत्।
अपृच्छदेनं स च बस्तिमब्रवीद्विधिं च तस्याह पुनः प्रचोदितः।। १९।।

After having understood the aforesaid concept in its entirety by intelligence, the disciple (Agniveśa) enquired about the curatives of diseases affecting elephants, camels, cattle, horses, sheep and goats.

The Preceptor (Ātreya) described *basti* (medicated enema) [as the excellent therapy for the treatment of their diseases].

After further query, the Preceptor explained the procedure of administering enema to these animals as follows (to be discussed in subsequent verse nos. 20-26). [19]

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Enema-receptacles for Different Animals

आजोरणौ सौम्य गजोष्ट्रयोः कृते गवाश्वयोर्बस्तिमुशन्ति माहिषम्।
अजाविकानां तु जरद्गवोद्भवं वदन्ति बस्तिं तदुपायचिन्तकाः।। २०।।

For giving enema to the elephant and camel, the urinary bladder of goat and sheep should be used as enema-receptacle (*basti*).

For giving enema to cows and horses, the urinary bladder of buffalo should be used as enema-receptacle.

For giving enema to goats and sheep, the urinary bladder of old ox (*jaradgava*) should be used as enema-receptacle.

O! blessed on (adressed to the disciple Agniveśa), this is the opinion of veterinary physicians proficient in the administration of medicated enema to animals. [20]

Enema-nozzle for Different Animals

अरत्निमष्टादशषोडशाङ्गुलं तथैव नेत्रं हि दशाङ्गुलं क्रमात्।
गजोष्ट्रगोश्वाव्यजबस्तिसंधौ चतुर्थभागोपनयं हितं वदेत्।। २१।।

The length of enema-nozzles for different animals should be as follows :

(a) Elephants : one *aratni* (length of the fore-arm);

(b) Camels : 18 *aṅgulas* (one *aṅgula* = 3/4 th of an inch);

(c) Cattle and horses : 16 *aṅgulas*; and

(d) Sheep and goats : 10 *aṅgulas*

It is stated to insert one fourth of this length of the nozzle into the anus of the animal while administering enema. [21]

[The use of the term '*kramāt*' implies 'respectively'. But in the above text four types of nozzles are described for to be used for six types of animals. In the verse no. 22, while describing the receptacles of enema, these animals are coupled. In view of this, there will be three groups of animals. Therefore, use of the term '*kramāt*' becomes irrelevant. Cakrapāṇi has not commented upon this discrepancy. Therefore, we have taken two animals, viz., elephant and camel separately because of the significant variation is their size, and put the remaining four animals

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into three groups in the above translation of the text to justify the term '*kramāt*'. This view is supported by the description of the quantity of enema-recipe described in the next verse no. 22 to be used for different categories of animals.]

Dose of Enema-recipe for Different Animals

प्रस्थस्त्वजाव्योर्हि निरूहमात्रा गवादिषु द्वित्रिगुणं यथाबलम्।
निरूहमुष्ट्रस्य तथाऽऽढकद्वयं गजस्य वृद्धिस्त्वनुवासनेऽष्टमः।। २२।।

The dose of the fluid to be used as *nirūha* (evacuative enema) for different animals should be as follows :

(a) Goats and sheep : one *prastha* (64 *tolās*);

(b) Cattle (cows, buffalo and horses) : two to three *prasthas* depending upon their physique;

(c) Camels : two *āḍhakas* (one *āḍhaka* = 256 *tolās*); and

(d) Elephants : four *āḍhakas*.

For *anuvāsana* (unctuous type of medicated enema), the quantity of oil, etc., to be used for these animals should be one-eighth of the quantity prescribed above for *nirūha* (evacuative type of medicated enema). [22]

Enema-recipe for All Animals in General

कलिङ्गकुष्ठे मधुकं च पिप्पली वचा शताह्वा मदनं रसाञ्जनम्।
हितानि सर्वेषु गुडः ससैन्धवो द्विपञ्चमूलं च विकल्पना त्वियम्।। २३।।

The recipe containing [the decoction of] ingredients like *kaliṅga, kuṣṭha, madhuka, pippalī, vacā, śatāhvā, madana* and *rasāñjana,* and added with jaggery, rock-salt and two varieties of *pañca-mūla* (*bilva, śyonāka, gambhārī, pāṭalā, gaṇi-kārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*) is useful for all the types of veterinary enema.[23]

Additional Ingredients for Elephants

गजेऽधिकाऽश्वत्थवटाश्वकर्णकाः सखादिरप्रग्रहशालतालताः।

The recipe described above (in verse no. 23) should be added with [the decoction of] ingredients like *aśvattha, vaṭa,*

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aśva-karṇa, khadira, pragraha (*śyonāka*), *śāla* and fruits of *tāla*. Enema, along with these additional ingredients, is useful for curing diseases of elephants. [$^{2}/_{4}$ 24]

Additional Ingredients for Cows

तथा च पर्ण्यौ धवशिग्रुपाटलीमधूकसाराः सनिकुम्भचित्रकाः।। २४।। पलाशभूतीकसुराह्वरोहिणीकषाय उक्तस्त्वधिको गवां हितः।

The decoction of *mudga-parṇī, māṣa-parṇī, dhava, śigru, pāṭalī, madhūka-sāra* (heart-wood of *madhūka*), *nikumbha, citraka, palāśa, bhūtīka* (*ajamodā*), *surāhva* (*deva-dāru*) and *rohiṇī* (*kaṭu-rohiṇī*) should be used in addition (to the drugs described in the verse no. 23) as enema for cattle-diseases.

[$24^{2}/_{4}$ - $^{2}/_{4}$ 25]

Additional Ingredients for Horses

पलाशदन्तीसुरदारुकत्तृणद्रवन्त्य उक्तास्तुरगस्य चाधिकाः।। २५।।

The decoction of *palāśa, dantī, sura-dāru, kattṛṇa* and *dravantī,* in addition (to the decoction of drugs described in the verse no. 23) should be used for enema to cure diseases of horses. [25 $^{2}/_{4}$]

Additional Ingredients for Asses and Camels

खरोष्ट्रयोः पीलुकरीरखादिराः शम्याकबिल्वादिगणस्य च च्छदाः।

The decoction of *pīlu, karīra, khadira, śamyāka* and leaves of drugs belonging to *Bilvādi*-group should be used in addition (to the decoction of drugs described in the verse no. 23) as enema for the diseases of asses and camels. [$^{2}/_{4}$ 26]

Additional Ingredients for Goats and Sheep

अजाविकानां त्रिफलापरूषकं कपित्थकर्कन्धु सबिल्वकोलजम्।। २६।।

The decoction fo *harītakī, bibhītaka, āmalakī, parūṣaka, kapittha, karkandu, bilva* and *kola* should be used in addition (to the decoction of drugs described in the verse no. 23) as enema for the diseases of goats and sheep. [26 $^{2}/_{4}$]

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Query About Persons Always Exposed to Diseases

अथाग्निवेशः सततातुरान् नरान् हितं च पप्रच्छ गुरुस्तदाह च।
सदाऽऽतुराः श्रोत्रियराजसेवकास्तथैव वेश्या सह पण्यजीविभिः।। २७।।

Thereafter, Agniveśa enquired from the Preceptor about the persons who are eternally sick, and also about their treatment. The Preceptor replied that the persons who are eternally exposed to sickness are the following :

(a) *Śrotriyas* (people belonging to the priest class);

(b) *Rāja-sevakas* (servants of the King);

(c) *Veśyās* (courtesans); and

(d) *Paṇya-jīvins* (merchants). [27]

Basti or medicated enema therapy is also useful for persons who are eternally exposed to illness because of their professions. These categories of persons are described in the above text.

Priests

द्विजो हि वेदाध्ययनव्रताह्निकक्रियादिभिर्देहहितं न चेष्टते।

The priests (brahmins) are always engaged in the study of the vedas, observance of different types of sacred vows (*vratas*), performance of daily rituals (*āhnika-kriyā*), etc. They, thus, fail to attend to regimens which are useful for their health. [$^{2}/_{4}$ 28]

King's Servants

नृपोपसेवी नृपचित्तरक्षणात् परानुरोधाद्बहुचिन्तनाद्भयात्।। २८।।

King's servants are always preoccupied with such acts as would cause the gratification of the King's mind. They cater to the requirements of other subordinates of the King, and they are exposed to excessive worry and fear; [thus, they fail to attend to their regimens which are useful for their health]. [28 $^{2}/_{4}$]

Courtesans

नृचित्तवर्तिन्युपचारतत्परा मृजाभि(वि)भूषानिरता पणाङ्गना।

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Depending upon the whims and the moods of men (claints), the courtesan devotes herself to their entertainment constantly by keeping her body clean, and by using various cosmetics as well as ornaments. [Thus, they fail to attend to their regimens which are useful for their health.] [$^{2}/_{4}$ 29]

Merchants

सदासनादत्यनुबन्धविक्रयक्रयादिलोभादपि पण्यजीविनः।। २९।।

Merchants constantly lead a sedentary life being excessively attached to greediness involved in their profession of selling and purchasing goods. [Thus, they fail to attend to regimens which are useful for their health.] [29 $^{2}/_{4}$]

Common Causes of Their Diseases

सदैव ते ह्यागतवेगनिग्रहं समाचरन्ते न च कालभोजनम्।
अकालनिर्हारविहारसेविनो भवन्ति येऽन्येऽपि सदाऽऽतुराश्च ते।। ३०।।

All the above mentioned four categories of persons become eternally sick because of the following :

(a) They always suppress the manifested natural urges;

(b) They never take food in time;

(c) They always void stool, urine, etc., untimely; and

(d) They resort to different regimens untimely.

Other persons (apart from priests, king's servants, courtesans and merchants) who resort to the above mentioned irregularities also become perpetually sick. [30]

Use of Phala-varti for Treatment of Their Sickness

समीरणं वेगविधारणोद्धतं विबन्धसर्वाङ्गरुजाकरं भिषक्।
समीक्ष्य तेषां फलवर्तिमादितः सुकल्पितां स्नेहवतीं प्रयोजयेत्।। ३१।।

Because of the suppression of natural urges, *vāyu* gets aggravated to cause constipation and pain all over the body. The physician, having ascertained this, should, in the beginning, give *phala-varti* (medicated suppository) well prepared with unctuous material. [31]

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Nirūha and Anuvāsana-basti

पुनर्नवैरण्डनिकुम्भचित्रकान् सदेवदारुत्रिवृतानिदिग्धिकान्।
महान्ति मूलानि च पञ्च यानि विपाच्य मूत्रे दधिमस्तुसंयुते।। ३२।।
सतैलसर्पिर्लवणैश्च पञ्चभिर्विमूर्च्छितं बस्तिमथ प्रयोजयेत्।
निरूहितं धन्वरसेन भोजितं निकुम्भतैलेन ततोऽनुवासयेत्।। ३३।।

Punarnavā, eraṇḍa, nikumbha, citraka, deva-dāru, trivṛt, nidigdhikā and *mahā-pañca-mūla* (*bilva, śyonāka, gambhārī, pāṭalā* and *gaṇi-kārikā*) should be cooked by adding cow's urine, curd and whey. To this, oil, ghee and five types of salt (*saindhava, sāmudra, viḍa, sauvarcala* and *audbhida*) should be added. With this recipe, *nirūha* type of enema should be given. After this, the patient should be given food prepared by cooking with the meat-soup of animals living in arid zone.

Thereafter, he should be given *anuvāsana* or unctuous type of enema with *Nikumbha-taila.* [32-33]

Medicated oil prepared by cooking oil with the decoction and paste of *dantī* is called *Nikumbha-taila.* This medicated oil is to be used for *anuvāsana-basti.*

Other Recipes for Basti

बलां सरास्नां फलबिल्वचित्रकान् द्विपञ्चमूलं कृतमालकात् फलम्।
यवान् कुलत्थांश्च पचेज्जलाढके रसः स पेष्यैस्तु कलिङ्गकादिभिः।। ३४।।
सतैलसर्पिर्गुडसैन्धवो हितः सदातुराणां बलवर्णवर्धनः।
तथाऽनुवास्ये मधुकेन साधितं फलेन बिल्वेन शताह्वयाऽपि वा।। ३५।।

Balā, rāsnā, phala (*madana-phala*), *bilva, citraka,* two varieties of *pañca-mūla* (*bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*), fruit of *kṛta-māla* (*āragvadha*), *yava* and *kulattha* should be boiled by adding one *āḍhaka* (256 *tolās*) of water. To this decoction, the paste of *kaliṅga,* etc., (vide verse no. 23 for details of these drugs), oil, ghee, jaggery and rock-salt should be added. Enema with this recipe is useful for persons who are perpetually sick (vide verse no. 27). This enema promotes their strength and complexion.

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Similarly, for these patients, oil cooked with either *madhuka, phala* (*madana-phala*), *bilva* or *śatāhvā* may be used for *anuvāsana* or unctuous type of enema. [34 - 35]

Enema-recipes for Infants

सजीवनीयस्तु रसोऽनुवासने निरूहणे चालवणः शिशोर्हितः।
न चान्यदाश्वङ्गबलाभिवर्धनं निरूहबस्तेः शिशुवृद्धयोः परम्।। ३६।।

Anuvāsana (unctuous type of medicated enema) prepared of the decoction of drugs belonging to *Jīvanīya*-group (*jīvaka, ṛṣabhaka, medā, mahā-medā, kākolī, kṣīra-kākolī, mudga-parṇī, māṣa-parṇī, jīvantī* and *madhuka* -- vide *Sūtra* 4 : 9 : 1), and *nirūha* (evacuative type of medicated enema) prepared of these very drugs without adding salt are useful for children.

There is no therapy other than *nirūha-basti* which effectively and rapidly promotes the growth of limbs and physical strength of both infants and old persons. [36]

Epilogue

तत्र श्लोकः-
फलकर्म बस्तिवरता नेत्रं यद्बस्तयो गवादीनाम्।
सततातुराश्च दिष्टाः फलमात्रायां हितं चैषाम्।। ३७।।

To sum up :

In this chapter entitled "*Phala-mātrā-siddhi*" the topics discussed are as follows :

(1) Action of various types of fruits;
[vide verse nos. 5-14]

(2) Excellence of *basti*-therapy;
[vide verse nos. 15-18]

(3) The nozzle for giving enema to animals;
[vide verse nos. 19-22]

(4) Enema-recipes for cattle, etc.;
[vide verse nos. 23-26]

(5) Categories of persons who are perpetually sick; and
[vide verse nos. 27-30]

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(6) Therapies useful for these perpetually sick persons. [vide verse nos. 31-36] [37]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढ-
बलसंपूरिते सिद्धिस्थाने फलमात्रासिद्धि-
र्नामैकादशोऽध्यायः ।। ११ ।।

Thus, ends the eleventh chapter of *Siddhi*-section dealing with the "Determination of Appropriateness of *Madana-phala,* etc., for Enema, and Its Veterinary Dose to Achieve Success" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

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CHAPTER - XII

द्वादशोऽध्यायः

(EXCELLENT ENEMA RECIPES)

Prologue

अथात उत्तरबस्तिसिद्धिं व्याख्यास्यामः।।१।।
इति ह स्माह भगवानात्रेयः।।२।।

We shall now expound the chapter dealing with the "Sucessful Application of Excellent Recipes for Medicated Enema".

Thus, said Lord Ātreya. [1-2]

[The term "*uttara-basti*" has been explained earlier (*Siddhi* 9 : 65) to mean urethral or vaginal (*uttara*) douche (*basti*). In that context, the term '*uttara*' meant 'anterior', the urethral and vaginal passages being positioned anterior to the anal opening (through which the normal *basti* or enema is given). In the present context, however, the term '*uttara*' means 'excellent', and '*basti*' implies "the recipes for enema". Thus, this chapter deals with successful application (*siddhi*) of excellent (*uttara*) recipes for medicated enema (*basti*).]

Post-therapeutic Management of Patients

अथ खल्वातुरं वैद्यः संशुद्धं वमनादिभिः।
दुर्बलं कृशमल्पाग्निं मुक्तसंधानबन्धनम्।।३।।
निर्हृतानिलविण्मूत्रकफपित्तं कृशाशयम्।
शून्यदेहं प्रतीकारासहिष्णुं परिपालयेत्।।४।।
यथाऽण्डं तरुणं पूर्णं तैलपात्रं यथैव च।
गोपाल इव दण्डी गाः सर्वस्मादपचारतः।।५।।

As a freshly hatched egg has to be handled with tenderness, as a brimful oil-pot has to be handled with care, and as the cattle are protected by a cowherd with a staff in his hand, similarly the physician should carefully protect the patient

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from the unwholesome (diets, regimens, etc.) factors because after the administration of purificatory therapies his body undergoes changes as follows :

(1) The body of the patient becomes weak and emaciated;

(2) His digestive power becomes weak;

(3) The ligaments binding his joints become loose;

(4) The (gastro-intestinal tract, bladder and other) visceras become empty (emaciated) because of the elimination of flatus, feces, urine, *kapha* (phlegm) and *pitta* (bile);

(5) The body becomes empty; and

(6) The patient becomes intolerant to adverse situations (like loud speech and other strong therapeutic measures). [3-5]

In the above text, the physician is advised to protect the tender health of his patient after the administration of elimiantion therapies like emesis, purgation, *nirūha* (evacuative enema) and *śiro-virecana* (inhalation therapy).

In the next verse no. 6, the patient is advised to be given *peyā* (thin gruel), etc., for the protection of his health. These dietetic regimens are required only after emesis and purgation. After *nirūha* and *śiro-virecana,* such regimens are not necessary.

Three different similes described above indicate that in different situations, the physician is required to act differently, i.e. with tenderness, carefulness and protective attitude.

Post-therapeutic Diet

अग्निसंधुक्षणार्थं तु पूर्वं पेयादिना भिषक्।
रसोत्तरेणोपचरेत् क्रमेण क्रमकोविदः।। ६।।
स्निग्धाम्लस्वादुहृद्यानि ततोऽम्ललवणौ रसौ।
स्वादुतिक्तौ ततो भूयः कषायकटुकौ ततः।। ७।।
अन्योऽन्यप्रत्यनीकानां रसानां स्निग्धरूक्षयोः।
व्यत्यासादुपयोगेन प्रकृतिं गमयेद्भिषक्।। ८।।

After the administration of purificatory therapy, the

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physician who is adept in handling post-therapeutic measures should first of all give to the patient (gradually lighter to heavier) diet beginning with *peyā* (thin gruel) and ending with *rasa* (meat-soup) for the stimulation of *agni* (power of digestion and metabolism).

The patient should be given unctuous, sour, sweet and pleasing (*hṛdya*) food. Then he should be given dietetic articles having sour and saline tastes. Later on, he should be given those articles having sweet and bitter tastes. Thereafter, he should be given food articles having astringent and pungent tastes.

The patient should be given ingredients having mutually contradictory tastes, and mutually contradictory properties like unctuousness and ununctuousness alternatively till the normal diet (*prakṛti*) is stored. [6-8]

The term "*peyādinā.....rasottareṇa*" means "a course of regimen beginning with thin gruel, etc., and ending with meat-soup". It can also be interpreted differently inasmuch as after emetic and purgation therapies, the patient is required to be given *peyā* (thin gruel), etc., and after *nirūha* (evacuative of medicated enema), *rasa* (meat-soup), etc., since there is less of *agnimāndya* (suppression of the power of digestion and metabolism), after *nirūha*, the patient can be given heavier food like *rasa* (meat-soup), etc., This has already been explained before (vide *Siddhi* 1 : 21).

The term '*rasa*', in addition to 'meat-soup', has another meaning, i.e. 'taste'. Therefore, the term "*peyādinā... rasottareṇa*" may also be interpreted as "the patient should be given *peyā*, etc., (*peyādinā*) after which ingredients having different tastes (*rasottareṇa*) are to be given.

If purgation therapy, etc., are not intended to be given after the emetic therapy, then for the restoration of health and promotion of strength in the purified body of the patient, ingredients having different tastes are to be given. According to some other scholars, ingredients having different tastes are to be used while preparing *peyā* (thin gruel), etc. Ingredients having sour and sweet taste should be given in the beginning in order to alleviate *vāyu* in the colon, and to stimulate the *agni* (enzymes responsible for digestion), which is located in the gastro-intestinal tract above the colon, sour and saline ingredients are to be

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given. Thereafter, for the alleviation of *pitta* (located above *agni*), sweet and bitter ingredients are to be given. Finally, astringent and pungent ingredients are to be given for the alleviation of *kapha* which is located still higher in the gastro-intestinal tract.

For the aforesaid purpose, ingredients having mutually contradictory tastes are to be used simultaneously one after the other. These four couples of tastes are to be used in the preparation of *peyā*, etc. After the twelfth meal time, the patient should be given his normal food.

These ingredients having two tastes should be used alternatively, i.e. one after the other. Similarly, ingredients having mutually contradictory attributes, viz., unctuousness and ununctuousness should be used one after the other alternatively till there is restoration of normal diet. *Snigdha* (unctuousness) and *rūkṣa* (ununctuousness) are described here only by way of illustration. Ingredients having other mutually contradictory attributes like *guru* (heaviness) and *laghu* (lightness) can be similarly used.

Restoration of Normal Health

सर्वक्षमो ह्यसंसर्गो रतियुक्तः स्थिरेन्द्रियः।
बलवान् सत्त्वसंपन्नो विज्ञेयः प्रकृतिं गतः।। ९।।

[After the intake of *peyā*, etc., and ingredients having different tastes as well as attributes], the patient is to be considered as having normal health restored as indicated by the following factors :

(1) Ability to take and digest various ingredients having all the different tastes;

(2) Non-obstruction to his natural urges;

(3) Restoration of the zest for life;

(4) Sharp functioning of the senses;

(5) Return of strength; and

(6) Endowment of strong will power. [9]

A variant reading in the place of '*asaṃsarga*' in the above verse is '*nirāsaṅga*'. This variant reading implies "ability to perform everything without getting defeated by predetermined impediments."

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Eight Impediments

एतां प्रकृतिमप्राप्तः सर्ववर्ज्यानि वर्जयेत्।
महादोषकराण्यष्टाविमानि तु विशेषतः।।१०।।
उच्चैर्भाष्यं रथक्षोभमतिचङ्क्रमणासने।
अजीर्णाहितभोज्ये च दिवास्वप्नं समैथुनम्।।११।।
तज्जा देहोर्ध्वसर्वाधोमध्यपीडामदोषजाः।
श्लेष्मजाः क्षयजाश्चैव व्याधयः स्युर्यथाक्रमम्।।१२।।

Till the health, as characterized by the above is restored, the patient should avoid all the prohibited activities. He should specially avoid eight factors which are exceedingly harmful. These are as follows :

(1) *Uccaiḥ bhāṣya* or loud speech : This causes pain in the upper part of the body;

(2) *Ratha-kṣobha* or jolts by riding wooden cart (conveyance) : This causes pain all over the body;

(3) *Ati-cańkramaṇa* or long wayfaring : This causes pain in the lower part of the body;

(4) *Ati-āsana* or constant sitting : This causes pain in the middle part of the body;

(5) *Ajīrṇa* or indigestion : This gives rise to diseases caused by *āma* or uncooked material;

(6) *Ahita-bhojana* or intake of unwholesome food : This gives rise to diseases caused by different *doṣas*;

(7) *Divā-svapna* or sleep during day time : This gives rise to diseases caused by *kapha*; and

(8) *Maithuna* or sexual intercourse : This gives rise to diseases caused by *kṣaya* or diminution of tissue elements. [10-12]

Details of Impediments

तेषां विस्तरतो लिङ्गमेकैकस्य च भेषजम्।
यथावत्संप्रवक्ष्यामि सिद्धान् बस्तींश्च यापनान्।।१३।।

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Now, I (refers to Ātreya) shall appropriately explain in detail the signs, treatment and effective *yāpanā* type of *bastis* (medicated enemas) for each of these impediments. [13]

(1) Complications of Loud and Excessive Speech

तत्रोच्चैर्भाष्यातिभाष्याभ्यां शिरस्तापशङ्खकर्णनिस्तोदश्रोत्रोपरोधमुख-तालुकण्ठशोषतैमिर्यपिपासाज्वरतमकहनुग्रहमन्यास्तम्भनिष्ठीवनोरःपार्श्व-शूलस्वरभेदहिक्काश्वासादयः स्युः (१);

Speaking loudly or speaking in excess [before the restoration of normal health after the purificatory therapy] gives rise to complications as follows :

(1) Burning sensation in the head;

(2) Pricking pain in the temples and ears;

(3) Auditory dysfunction (deafness);

(4) Dryness of mouth, palates and throat;

(5) Fainting;

(6) Thirst, fever, *tamaka* (a feeling as if entering into darkness), spasticity of jaws, torticolis and ptyalism;

(7) Pain in the chest and sides of the chest;

(8) Hoarseness of voice;

(9) Hiccup and asthma; and

(10) Such other complications. [14 (1)]

Though *ati-bhāṣya* (speaking in excess) is not mentioned as one of the impediments in the verse no. 11, this additional factor is described in the above text because it shares the effects (complications) of *uccaiḥ-bhāṣya* (speaking loudly).

(2) Complications of Jolting by Conveyance

रथक्षोभात् संधिपर्वशैथिल्यहनुनासाकर्णशिरःशूलतोदकुक्षिक्षोभाटोपान्त्रकूजनाध्मानहृदयेन्द्रियोपरोधस्फिक्पार्श्ववंक्षणवृषणकटीपृष्ठवेदनासंधिस्कन्थग्रीवादौर्बल्याङ्गाभितापपादशोफप्रस्वापहर्षणादयः(२);

Jolting caused by riding conveyance [before the restoration

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of normal health after purificatory therapy] gives rise to complications as follows :

(1) Looseness of big and small joints;

(2) Colic and pricking pain in jaws, nose, ears and head;

(3) Irritation in the pelvic region, meteorism, gurgling noise in intestines and flatulence;

(4) Obstruction in the functioning of the heart and sense organs;

(5) Pain in the hips, sides of the chest, groin, scrotum, waist and back;

(6) Weakness of joints, shoulders and neck;

(7) Burning sensation in limbs;

(8) Oedema, numbness and tingling sensation in feet; and

(9) Such other complications. [14 (2)]

(3) Complications of Long Wayfaring

अतिचङ्क्रमणात् पादजङ्घोरुजानुवङ्क्षणश्रोणीपृष्ठशूलसक्थिसादनिस्तोदपिण्डकोद्वेष्टनाङ्गमर्दांसाभितापसिराधमनीहर्षश्वासकासादयः(३);

Long wayfaring [before the restoration of health after the purificatory therapy] gives rise to complications as follows :

(1) Pain in the feet, calf regions, thighs, knees, groins, waist and back;

(2) Asthenia and pricking pain in legs (*sakthi*);

(3) Cramps in the calf region;

(4) Malaise;

(5) Burning sensation in the shoulders;

(6) Swelling of the veins and arteris;

(7) Asthma and cough; and

(8) Such other complications. [14 (3)]

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(4) Complications of Constant Sitting

अत्यासनाद्रथक्षोभजाः स्फिक्पार्श्ववङ्क्षणवृषणकटीपृष्ठवेदनादयः (४);

Constant sitting [before the restoration of health after purificatory therapy] gives rise to complications like pain in the hips, sides of the chest, groins, scrotum, waist and back which are described earlier in respect of jolting by conveyance, and such other complications. [14 (4)]

Complications arising out of constant sitting are partly similar to those caused by the jolting in conveyances. These are specially enumerated here because, in addition, some other complications like looseness of joints, etc., arise exclusively by jolting in conveyances.

(5) Complications of Indigestion and Adhyaśana

अजीर्णाध्यशनाभ्यां तु मुखशोषाध्मानशूलनिस्तोदपिपासागात्रसाद-च्छर्द्यतीसारमूर्च्छाज्वरप्रवाहणामविषादयः(५);

Indigestion and *adhyaśana* (intake of food before the previous meal is digested) [before the restoration of normal health after purificatory therapy] give rise to following complications :

(1) Dryness of the mouth, flatulence, colic pain and pricking pain;

(2) Thirst, prostration of the body, vomiting, diarrhoea, fainting, fever and gripping pain;

(3) *Āma-viṣa* or poisoning effect caused by *āma* (product of indigestion); and

(4) Such other complications; [14 (5)]

Only *ajīrṇa* or indigestion is enumerated in verse no. 11 to be one of the impediments. *Adhyaśana* or taking food before the previous meal is digested, though not mentioned there, also produces *āma* because of which it is included in the above text.

(6) Complications of Unwholesome Food and Irregular Meal

विषमाहिताशनाभ्यामनन्नाभिलाषदौर्बल्यवैवर्ण्यकण्डूपामागात्रावसा-दवातादिप्रकोपजाश्च ग्रहण्यर्शोविकारादयः(६);

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Intake of irregular meals and unwholesome food [before the restoration of normal health after purificatory therapy] produces complications as follows :

(1) Lack of desire for taking food;

(2) Weakness, discoloration of the skin, itching, scabies and prostration of the body; and

(3) Sprue, piles and such other diseases caused by the aggravation of *vāyu.* [14 (6)]

Intake of unwholesome *(ahitāśana)* and irregular food *(viṣamāśana)* produces identical effects. Hence the latter, though not enumerated in verse no. 11, is described in the above text.

(7) Complications of Day-sleep

दिवास्वप्नादरोचकाविपाकाग्निनाशस्तैमित्यपाण्डुत्वकण्डूपामादाहच्छर्ध्यङ्गमर्दहृत्स्तम्भजाड्यतन्द्रानिद्राप्रसङ्गग्रन्थिजन्मदौर्बल्यरक्तमूत्राक्षितातालुलेपाः (७);

Sleep during the day time [before the restoration of normal health after purificatory therapy] produces complications as follows :

(1) Anorexia, indigestion and suppression of the power of digestion;

(2) *Staimitya* (feeling as if the body is covered with wet leather);

(3) Anemia, itching, scabies, burning sensation, vomiting and malaise;

(4) Impairment of the cardiac function, stiffness, drowsiness and continuous sleep;

(5) Appearance of nodules;

(6) Weakness;

(7) Red coloration of urine and eyes; and

(8) Coating over the palate. [14 (7)]

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(8) Complications of Sexual Intercourse

व्यवायादाशुबलनाशोरुसादशिरोबस्तिगुदमेढ्रवंक्षणोरुजानुजङ्घापाद-शूलहृदयस्पन्दननेत्रपीडाङ्गशैथिल्यशुक्रमार्गशोणितागमनकासश्वासशोणित-ष्ठीवनस्वरावसादकटीदौर्बल्यैकाङ्ग-सर्वाङ्ग-रोगमुष्कश्वयथुवातवर्चोमूत्रसङ्ग-शुक्रविसर्गजाडचवेपथुबाधिर्यविषादादयः स्युः, अवलुप्यत इव गुदः, ताडचत इव मेढ्रम्, अवसीदतीव मनो, वेपते हृदयं, पीडचन्ते सन्धयः, तमः प्रवेशयत इव च (८);

Sexual intercourse [before the restoration of health after purificatory therapy] produces complications as follows :

(1) Instantaneous loss of strength;

(2) Prostration of thighs;

(3) Colicky pain in the head, region of urinary bladder, anus, phallus, groins, thighs, knees, calf-regions and feet;

(4) Palpitation of heart;

(5) Pain in the eyes;

(6) Asthenia of the limbs;

(7) Bleeding through the seminal passage;

(8) Cough, asthma, hemoptysis and asthenia of the voice;

(9) Weakness of lumbar region;

(10) Paralysis of the part of the body or the whole body;

(11) Oedema in the scrotum;

(12) Retention of flatus, stool and urine;

(13) Excessive discharge of semen;

(14) Numbness, trembling, deafness and *viṣāda* (depression);

(15) Similar other complications;

(16) A feeling as if the anus is being cut;

(17) Pain in the phallus as if it is being cut;

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(18) A feeling as if the mind is shrinking;

(19) Trembling of the heart;

(20) Pain in joints; and

(21) A feeling as if entering into darkness. [14-(8)]

इत्येवमेभिरष्टभिरपचारैरेते प्रादुर्भवन्त्युपद्रवाः।।१४।।

Thus, the above mentioned complications arise because of the eight types of impediments [described in the verse no. 11]. [14]

(1) Management of Complications Caused by Loud Speech & Excessive Speech

तेषां सिद्धिः- तत्रोच्चैर्भाष्यातिभाष्यजानामभ्यङ्गस्वेदोपनाहधूमनस्योपरिभक्तस्नेहनरसक्षीरादिर्वातहरः सर्वो विधिर्मौनं च (१);

Now the successful treatment of these complications [arising out of impediments during the period of convalescence] will be discussed.

Complications caused by loud speech and excessive speech can be cured by all the *vāyu*-alleviating measures including the following :

(1) Massage and fomentation therapies;

(2) *Upanāha* (application of hot polutices);

(3) *Dhūma* (smoking therapy);

(4) *Nasya* (inhalation therapy);

(5) *Upari-bhakta sneha-pāna* (intake of medicated ghee after the meal);

(6) Intake of meat-soup, milk, etc., and

(7) Observance of silence. [15 (1)]

(2)-(4) Management of Complications Caused by Conveyance-jolting, etc.

रथक्षोभातिचङ्क्रमणात्यासनजानां स्नेहस्वेदादि वातहरं कर्म सर्वं निदानवर्जनं च (२);

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Complications because of jolting by conveyance, long wayfaring and excessive sitting can be cured by all *vāyu*-alleviating therapies like oleation, fomentation, etc. The patient should avoid the causative factors. [15 (2)]

(5) Management of Complications Caused by Indigestion & Adhyaśana

अजीर्णाध्यशनजानां निरवशेषतश्छर्दनं रूक्षः स्वेदो लङ्घनीयपाचनीयदीपनीयौषधावचारणं च (३);

Complications arising out of indigestion and *adhyaśana* (taking food before the previous meal is digested) can be cured by the following :

(1) Administration of emetic therapy in order to completely take out the undigested material [from the stomach];

(2) *Rūkṣa-sveda* (dry or ununctuous fomentation); and

(3) Administration of medicaments which are *laṅghanīya* (producing lightening effect on the body), *pācanīya* (carminative) and *dīpanīya* (digestive stimulant).

[15 (3)]

(6) Management of Complications Caused by Irregular Meal & Unwholesome Food

विषमाहिताशनजानां यथास्वं दोषहराः क्रियाः (४);

Complication arising out of irregular meal and intake of unwholesome food can be cured by appropriate therapies for the alleviation of respective *doṣas* which are aggravated.

[15 (4)]

(7) Management of Complications Caused by Day-sleep

दिवास्वप्नजानां धूमपानलङ्घनवमनशिरोविरेचनव्यायामरूक्षाशनारिष्टदीपनीयौषधोपयोगः प्रघर्षणोन्मर्दनपरिषेचनादिश्च श्लेष्महरः सर्वो विधिः (५);

Complications arising out of day-sleep can be cured by all the *kapha*-alleviating measures including the following :

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(1) *Dhūma-pāna* (smoking therapy);

(2) *Laṅghana* (fasting or lightening therapy);

(3) *Vamana* (emetic therapy);

(4) *Śiro-virecana* (therapy for the elimination of morbid matter from the head);

(5) *Vyāyāma* (physical exercise);

(6) *Rūkṣa-aśana* (intake of ununuctuous food);

(7) *Ariṣṭa* (intake of alcoholic preparations);

(8) Administration of drugs which are *dīpanīya* (digestive stimulant); and

(9) *Pragharṣaṇa* (friction massage), *unmardana* (kneading the body) and *pariṣecana* (hot affusion), etc.

(8) Management of Complications Caused by Sexual Intercourse

मैथुनजानां जीवनीयसिद्धयोः क्षीरसर्पिषोरुपयोगः, तथा वातहराः स्वेदाभ्यङ्गोपनाहा वृष्याश्चाहाराः स्नेहाः स्नेहविधयो यापनाबस्तयोऽनुवासनं च; मूत्रवैकृतबस्तिशूलेषु चोत्तरबस्तिर्विदारीगन्धादिगणजीवनीयक्षीरसंसिद्धं तैलं स्यात्।। १५ ।।

Complications caused by sexual intercourse can be cured by the following :

(1) Administration of milk and ghee cooked by adding drugs belonging to *Jīvanīya*-group (*jīvaka, ṛṣabhaka, medā, mahā-medā, kākolī, kṣīra-kākolī, mudga-parṇī, māṣa-parṇī, jīvantī* and *madhuka* - vide *Sūtra* 4 : 9 : 1);

(2) Administration of fomentation, massage and *upanāha* (application of hot poultice) which are the alleviators of *vāyu;*

(3) Intake of food, promotive of virility;

(4) Intake of unctuous food and application of unctuous therapies;

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(5) *Yāpanā* and *anuvāsana* types of medicated enema; and

(6) If there are urinary morbidities, and pain in the region of urinary bladder, then *uttara-basti* (urethral douche) should be given with oil cooked by adding milk boiled with *vidārī-gandhādi* and *Jīvanīya* groups of drugs. [15]

To the paste and decoction of drugs belonging to *Vidārī-gandhādi* and *Jīvanīya* groups, milk and oil should be added and cooked. This medicated oil should be used for *uttara-basti* (urethral douche).

(1) [Mustādya Yāpanā-basti)

यापनाश्च बस्तयः सर्वकालं देयाः; तानुदेक्ष्यामः—मुस्तोशीरबलारग्वधरास्नामञ्जिष्ठाकटुरोहिणीत्रायमाणापुनर्नवाबिभीतकगुडूचीस्थिरादिपञ्चमूलानि पलिकानि खण्डशः क्लृप्तान्यष्टौ च मदनफलानि प्रक्षाल्य जलाढके परिक्वाथ्य पादशेषो रसः क्षीरद्विप्रस्थसंयुक्तः पुनः शृतः क्षीरावशेषः पादजाङ्गलरसस्तुल्यमधुघृतः शतकुसुमामधुककुटजफलरसाञ्जनप्रियङ्गुकल्कीकृतः ससैन्धवः सुखोष्णो बस्तिः शुक्रमांसबलजननः क्षतक्षीणकासगुल्मशूलविषमज्वरब्रध्न(वर्ध्म)कुण्डलोदावर्तकुक्षिशूलमूत्रकृच्छ्रासृग्जोविसर्पप्रवाहिकाशिरोरुजाजानूरुजङ्घाबस्तिग्रहाश्मर्युन्मादार्शःप्रमेहाध्मानवातरक्तपित्तश्लेष्मव्याधिहरः सद्यो बलजननो रसायनश्चेति (१);

Yāpanā type of *basti* (medicated enema for the promotion of longevity) can be administered at all times. The recipes for this type of medicated enema will be described hereafter.

One *pala* each of *mustā, uśīra, balā, āragvadha, rāsnā, mañjiṣṭhā, kaṭu-rohiṇī, trāyamāṇā, punarnavā, bibhītaka, guḍūcī, śāla-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura* should be cut into small pieces. To this, eight fruits of *madana* should be added. The whole recipe should then be washed well and cooked by adding one *āḍhaka* (256 *tolās*) of water till one-fourth of water remains. To this decoction, two *prasthas* (128 *tolās*) of cow's milk should be added, and boiled again till two *prasthas* of the liquid remains. To this liquid, half *prastha* of the soup of the meat of animals inhabiting arid zone, ghee

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taken in quantity equal to honey (as prescribed in earlier enema-recipes), and the paste of *śata-kusumā* (*śata-puṣpā*), *madhuka,* fruit of *kuṭaja, rasāñjana, priyaṅgu* as well as a little of *saindhava* (rock-salt) should be added. This recipe, when luke-warm, should be used for enema.

This medicated enema has the following therapeutic effects :

(1) It promotes semen, muscle tissue and strength;

(2) It cures *kṣata-kṣīṇa* (consumption), cough, *gulma* (phantom tumour), colic pain, irregular fever, *bradhna* or *vardhma* (inguinal swelling), *kuṇḍala* (circular movement of wind), *udāvarta* (upward movement of wind in the abdomen), pain in the pelvic region, dysuria, *asṛg-rajaḥ* (menorrhagia), *visarpa* (erysipelas), *pravāhikā* (dysentery) and headache;

(3) It cures stiffness of knee-joints, thighs, calf regions and the region of urinary bladder;

(4) It cures *aśmarī* (calculus in the urinary tract and in other parts of the body), insanity, piles, *prameha* (obstinate urinary disorders including diabetes), flatulence, *vāta-rakta* (gout) and diseases caused by aggravated *pitta* as well as *kapha;*

(5) It instantaneously promotes strength; and

(6) It rejuvenates the body. [16 (1)]

It is specifies in the above text that these *yāpanā* types of medicated enema can be given at all times. By implication, *nirūha* type of *basti* (medicated enema) cannot be given at all times.

These are called *yāpanā-basti* because they prolong (*yāpana*) the span of life.

(2) [Eraṇḍa-mūlādya Yāpanā-basti]

एरण्डमूलपलाशात् षट्पलं शालिपर्णीपृश्निपर्णी बृहती कण्टकारिका गोक्षुरको रास्नाऽश्वगन्धा गुडूची वर्षाभूरारग्वधो देवदार्विति पलिकानि खण्डशः क्लृप्तानि फलानि चाष्टौ प्रक्षाल्य जलाढके क्षीरपादे पचेत्।

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पादशेषं कषायं पूतं शतकुसुमाकुष्ठमुस्तपिप्पलीहपुषाबिल्ववचावत्सकफल-रसाञ्जनप्रियङ्गुयवानिप्रक्षेपकल्कितं मधुघृततैलसैन्धवयुक्तं सुखोष्णं निरूहमेकं द्वौ त्रीन् वा दद्यात्। सर्वेषां प्रशस्तो विशेषतो ललितसुकुमारस्त्रीविहार-क्षीणक्षतस्थविरचिरार्शसामपत्यकामानां च (२);

Six *palas* of the root and leaves of *eraṇḍa,* and one *pala* each of *śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī, gokṣura, rāsnā, aśvagandhā, guḍūcī, varṣābhū* (*punarnavā*), *āragvadha* and *deva-dāru* should be cut into pieces, washed well, and cooked by adding one *āḍhaka* of water and one-fourth *āḍhaka* of milk till one fourth of the liquid remains. To this decoction, the paste of *śata-kusumā (śata-puṣpā), kuṣṭha, musta, pippalī, hapuṣā, bilva, vacā,* fruit of *vatsaka, rasāñjana, priyaṅgu* and *yavānī* should be added. By adding honey, ghee, oil and rock-salt, this recipe, when luke-warm, should be given in the form of *nirūha* (evacuative enema) once, twice or three times.

This medicated enema is useful for all, specially for the following types of persons :

(1) Pleasure-loving people;

(2) Those having tender health;

(3) Those indulging in sex in excess;

(4) Emaciated persons and those suffering from phthisis;

(5) Old persons;

(6) Persons suffering from chronic piles; and

(7) Persons desirous of progeny. [16 (2)]

(3) [Sahacarādya Yāpanā-basti]

तद्वत् सहचरबलादर्भमूलसारिवासिद्धेन पयसा (३);

Following the above mentioned procedure, enema-recipe can be prepared of milk boiled with *sahacara, balā,* root of *darbha* and *sārivā.* [16 (3)]

The therapeutic effects of this enema-recipe are not specified here. These are, however, described in the verse nos. 20-22.

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(4) [Bṛhatyādi Yāpanā-basti]

तथा बृहतीकण्टकारीशतावरीच्छिन्नरुहाश्रृतेन पयसा मधुकमदन-पिप्पलीकल्कितेन पूर्ववद्बस्तिः (४);

Milk should be boiled by adding *bṛhatī, kaṇṭakārī, śatāvarī* and *chinna-ruhā*. To this milk, the paste of *madhuka, madana* and *pippalī* should be added. Following the above mentioned procedure (described in para 16-2) enema of this recipe should be given. [16 (4)]

The therapeutic effects of this enema-recipe are not specified in the above text. These are, however, described in the verse nos. 20-22

(5) [Balādya Yāpanā-basti - First Recipe]

तथा बलातिबलाविदारीशालिपर्णीपृश्निपर्णीबृहतीकण्टकारिकादर्भ-मूलपरूषककाश्मर्यबिल्वफलयवसिद्धेन पयसा मधुकमदनकल्कितेन मधु-घृतसौवर्चलयुक्तेन कासज्वरगुल्मप्लीहार्दितस्त्रीमद्यक्लिष्टानां सद्योबलजननो रसायनश्च (५);

Milk boiled with *balā, ati-balā, vidārī, śāli-parṇī. pṛśni-parṇī, bṛhatī, kaṇṭakārikā,* root of *darbha, parūṣaka, kāśmarya,* fruit of *bilva* and *yava* should be added with the paste of *madhuka* and *madana* along with honey, ghee as well as *sauvarcala*. Enema with this recipe instantaneously promotes strength, and rejuvenates the body of persons suffering from cough, fever, *gulma* (phantom tumour), *plīhā* (splenic disorders) and *ardita* (facial paralysis). This recipe also instantaneously promotes the strength, and rejuvenates the body of persons who are afflicted with excessive sexual indulgence and alcoholism. [16 (5)]

(6) [Balādya Yāpanā-basti -- Second Recipe]

बलातिबलारास्नारग्वधमदनबिल्वगुडूचीपुनर्नवैरण्डाश्वगन्धासहचर-पलाशदेवदारुद्विपञ्चमूलानि पलिकानि यवकोलकुलत्थद्विप्रसृतं शुष्कमूल-कानां च जलद्रोणसिद्धं निरूहप्रमाणावशेषं कषायं पूतं मधुकमदनशतपुष्पा-कुष्ठपिप्पलीवचावत्सकफलरसाञ्जनप्रियङ्गुयवानीकल्कीकृतं गुडघृततैलक्षौ-द्रक्षीरमांसरसाम्लकाञ्जिकसैन्धवयुक्तं सुखोष्णं बस्तिं दद्याच्छुक्रमूत्रवर्चःसङ्गेऽ-निलजे गुल्महृद्रोगाध्मानबृध्नपार्श्वपृष्ठकटीग्रहसंज्ञानाशबलक्षयेषु च (६);

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One *pala* each of *balā, ati-balā, rāsnā, āragvadha, madana, bilva* (fruit), *guḍūcī, punarnavā, eraṇḍa, aśvagandhā, sahacara, palāśa, deva-dāru, bilva* (root), *śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura,* and two *prasṛtas* each of *yava, kola, kulattha* as well as *śuṣka-mūlaka* should be boiled by adding one *droṇa* of water till five *prasṛtas* (vide commentary) of liquid remains. To this strained decoction, the paste of *madhuka, madana, śata-puṣpā, kuṣṭha, pippalī, vacā,* fruit of *vatsaka, rasāñjana, priyaṅgu* and *yavāṇī* should be added. By adding jaggery, ghee, oil, honey, milk, meat-soup, sour vinegar (*amla-kāñjika*) and *saindhva,* this recipe, when luke-warm, should be used for enema.

This enema cures the following ailments :

(1) Retention of semen, urine and stool caused by the aggravated *vāyu;* and

(2) *Gulma* (phantom tumour), *hṛd-roga* (heart-diseases), flatulence, *bradhna* (inguinal swellings), stiffness of the sides of the chest, back and lumbar region, unconsciousness and diminution of strength.

[16 (6)]

The quantity of decoction to be prepared should be sufficient for three enemas, i.e. five *prasthas*. The general rule (*paribhāṣā*) prescribed for the preparation of decoction should be followed in the present context.

(7) [Hapuṣādya Yāpanā-basti]

हपुषार्धकुडवो द्विगुणार्धक्षुण्णयवः क्षीरोदकसिद्धः क्षीरशेषो मधुघृत-तैललवणयुक्तः सर्वाङ्गविसृतवातरक्तसक्तविण्मूत्रस्त्रीखेदितहितो वातहरो बुद्धिमेधाग्निबलजननश्च (७);

Half *kuḍava* of *hapusā* and one *kuḍava* of half-crushed grains of *yava* should be boiled by adding water and milk till the quantity of liquid left over is equal to the quantity of milk. This should be added with honey, ghee, oil and rock-salt, [and administered for enema].

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This medicated enema has the following effects :

(1) It cures *vāta-rakta* (gout) afflicting the entire body;

(2) It cures retention of stool and urine;

(3) It cures affliction by ailments caused by excessive sexual intercourse with women;

(4) It alleviates *vāyu*; and

(5) It promotes wisdom, intellect, *agni* (power of digestion and metabolism) and strength. [16 (7)]

In the Kashmir recension of *Caraka-saṃhitā, mustā,* etc., described earlier (in 16-1) are stated to be added to the aforesaid enema-recipe.

(8) [Laghu-pañca-mūlādya Yāpanā-basti]

ह्रस्वपञ्चमूलीकषायः क्षीरोदकसिद्धः पिप्पलीमधुकमदनकल्कीकृतः सगुडघृततैललवणः क्षीणविषमज्वरकर्शितस्य बस्तिः (८);

Decoction of *laghu-pañca-mūla* (*śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*) prepared by boiling with milk and water should be added with the paste of *pippalī, madhuka* and *madana*. Added with jaggery, ghee, oil and rock-salt, this recipe should be administered as enema.

Enema with this recipe is useful for consumption and for persons emaciated because of *viṣama-jvara* (irregular fever). [16 (8)]

(9) [Balādya Yāpanā-basti -- Third Recipe]

बलातिबलापामार्गात्मगुप्ताष्टपलार्धक्षुण्णयवाञ्जलिकषायः सगुडघृत-तैललवणयुक्तः पूर्ववद्बस्तिः स्थविरदुर्बलक्षीणशुक्ररुधिराणां पथ्यतमः(९);

Eight *palas* of *balā, ati-balā, apāmārga* and *ātma-guptā,* and one *añjali* of half crushed barley should be made to a decoction [by boiling with milk and water]. To this decoction, jaggery, ghee, oil and rock-salt should be added, and used for enema as before.

This enema is exceedingly wholesome for old and weak persons, and for persons having diminished semen and blood. [16 (9)]

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(10) [Balādya Yāpanā-basti -- Fourth Recipe]

बलामधुकविदारीदर्भमूलमृद्वीकायवैः कषायमाजेन पयसा पक्त्वा मधुकमदनकल्कितं समधुघृतसैन्धवं ज्वरार्तेभ्यो बस्तिं दद्यात् (१०);

The decoction of *balā, madhuka, vidārī,* root of *darbha, mṛdvīkā* and *yava* should be boiled by adding goat's milk. This decoction should be mixed with the paste of *madhuka* and *madana*. This recipe should be added with honey, ghee and rock-salt.

Enema with this recipe is useful for persons suffering from fever. [16 (10)]

The decoction of *balā,* etc., should be added with goat's milk and boiled till the quantity of the remaining liquid is equal to the quantity of milk added to it.

(11) [Śāli-parṇyādya Yāpanā-basti]

शालिपर्णीपृश्निपर्णीगोक्षुरकमूलकाश्मर्यपरूषकखर्जूरफलमधूकपुष्पैर-जाक्षीरजलप्रस्थाभ्यां सिद्धः कषायः पिप्पलीमधुकोत्पलकल्कितः सघृतसैन्धवः क्षीणेन्द्रियविषमज्वरकर्शितस्य बस्तिः शस्तः (११);

Roots of *śāli-parṇī, pṛśni-parnī* and *gokṣura, kāśmarya, parūṣaka,* fruits of *kharjūra* and flowers of *madhūka* should be added with one *prastha* each of goat's milk and water, and cooked. In this decoction, the paste of *pippalī, madhuka* and *utpala* should be mixed. Added with ghee and rock-salt, this recipe should be used as enema.

This medicated enema is useful for weakened sense faculties and emaciation caused by *viṣama-jvara* (irregular fever). [16 (11)]

(12) [Sthirādi Yāpanā-basti]

स्थिरादिपञ्चमूलीपञ्चपलेन शालिषष्टिकयवगोधूममाषपञ्चप्रसृतेन छागं पयः शृतं पादशेषं कुक्कुटाण्डरससममधुघृतशर्करासैन्धवसौवर्चलयुक्तो बस्तिर्वृष्यतमो बलवर्णजननश्च। इति यापना बस्तयो द्वादश।। १६।।

Five *palas* of *sthirādi pañca-mūla (śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*), and five *prasṛtas* of

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śāli, ṣaṣṭika, yava, godhūma and *māṣa* should be boiled by adding goat's milk and reduced to one-fourth. In this decoction, equal quantity of the sap of hen's egg should be mixed. By adding honey, ghee, sugar, rock-salt and *sauvarcala* to this recipe, enema should be given.

This medicated enema is exceedingly aphrodisiac, and it promotes strength as well as complexion.

Thus, ends the description of twelve recipes for *yāpanā* type of *basti* (medicated enema for promotion of longevity). [16]

[In his commentary, Cakrapāṇi has interpreted the term '*erakā*' as '*hoggala*'. This term does not appear in this text. Perhaps, Cakrapāṇi had a slightly different text.]

Extension of Recipe No. Twelve

कल्पश्चैष शिखिगोनर्दहंससारसाण्डरसेषु स्यात्।। १७।।

The above mentioned enema-recipe can also be prepared by substituting the sap of a hen's egg with that of the eggs of *śikhi* (pea-hen), *gonarda* (hill-partridge), *haṃsa* (swan) or *sārasa* (crane). [17]

[Cakrapāṇi has described these extended recipes as of three types. In fact, this number should be three to comply with the total number of recipes as 216 (vide verse no. 28 describing the summary of these recipes). There seems to be some editorial error because of which four types of eggs are described in the above text. In verse no. 24, the egg of *sārasa* is not mentioned].

(13) [Tittirādya Yāpanā-basti]

सतित्तिरिः समयूरः सराजहंसः पञ्चमूलीपयःसिद्धः शतपुष्पामधुकरास्नाकुटजमदनफलपिप्पलीकल्को घृततैलगुडसैन्धवयुक्तो बस्तिर्बलवर्णशुक्रजननो रसायनश्च (१);

Pañca-mūla (śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī and *gokṣura*) should be boiled with milk. To this milk, soup of the meat of *tittiri, mayūra* and *rāja-haṃsa,* and the paste of *śata-puṣpā, madhuka, rāsnā, kuṭaja, madana-phala* and

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pippalī should be added. This recipe should be mixed with ghee, oil, jaggery and rock-salt, and used for enema.

Enema with this recipe promotes strength, complexion and semen. This rejuvenates the body. [18 (1)]

(14) [Dvi-pañca-mūlādya Yāpanā-basti]

द्विपञ्चमूलीकुक्कुटरससिद्धं पयः पादशेषं पिप्पलीमधुकरास्नामदनकल्कं शर्करामधुघृतयुक्तं स्त्रीष्वतिकामानां बलजननो बस्तिः (२);

Drugs belonging to two types of *pañca-mūla (bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*) and chicken-soup should be boiled by adding milk till one fourth of the liquid remains. To this liquid, the paste of *pippalī, madhuka, rāsnā* and *madana* should be added. By adding sugar, honey and ghee, this recipe should be used for enema.

Enema with this recipe promotes the strength of the persons who are addicted to excessive sexual indulgence. [18 (2)]

(15) [Mayūrādya Yāpanā-basti]

मयूरमपित्तपक्षपादास्यान्त्रं स्थिरादिभिः पलिकैः सजले पयसि पक्त्वा क्षीरशेषं मदनपिप्पलीविदारीशतकुसुमामधुककल्कीकृतं मधुघृतसैन्धवयुक्तं बस्तिं दद्यात् स्त्रीष्वतिप्रसक्तक्षीणेन्द्रियेभ्यो बलवर्णकरम् (३);

The gall-bladder, feather, legs, beak and intestines of peacock should be removed. The meat of this peacock should be added with one *pala* each of *śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*, and cooked by adding water and milk till the liquid remains is equal to the quantity of milk. To this liquid, the paste of *madana, pippalī, vidārī, śata-kusumā (śata-puṣpā)* and *madhuka* should be added. By further adding honey, ghee and rock-salt, this recipe should be used for enema.

Enema with this recipe promotes the strength and complexion of persons who had diminished functioning of

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their sensory faculties and motor organs because of over-indulgence in sex. [18 (3)]

Extension of Recipe No. Fifteen

कल्पश्चैष विष्किरप्रतुदप्रसहाम्बुचरेषु स्यात्, अक्षीरो रोहितादिषु च मत्स्येषु (४);

The above mentioned enema-recipe can be prepared by substituting peacock-meat with the meat of animals and birds of the following categories :

(1) *Viṣkira* (gallinaceous birds);

(2) *Pratuda* (pecker birds);

(3) *Prasaha* (animals and birds who eat by snatching their food); and

(4) *Vāricara* (birds moving in the water).

Similarly, different types of fish like *rohita* can be used in the place of the meat of peacock. But, while preparing enema-recipes with fish, milk should not be added.[18 (4)]

These recipes are 115 in number as follows :

(1) Twenty recipes containing birds belonging to *viṣkira*-group (gallinaceous birds), viz., *lāva*, etc., (group-I) and *vartaka*, etc., (group-II) as described in *Sūtra* 27:47-49. Actually 21 birds are described there. *Mayūra* (*barhi*) or peacock is one of these birds. Since enema-recipe with peacock meat is already described in the recipe no. 15, this bird is to be excluded from the perview of the description made in the above text.

(2) Thirty recipes containing the meat of birds belonging to *pratuda*-group (pecker birds) as described in *Sūtra* 27:50-52. [Our translation of this text on page 503 of vol. I is not in conformity with Cakrapāṇi's commentary here].

(3) Twenty nine recipes containing the meat of animals and birds belonging to *prasaha*-group (those who eat by snatching their food) as described in *Sūtra* 27:35-37.

(4) Twenty seven recipes containing the meat of birds belonging to *ambucara* or *vāricara*-group (those moving in water) as described in *Sūtra* 27:41-44. [Our translation of this text on

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pages 501-502 of Vol. I is not in conformity with Cakrapāṇi's commentary here].

(5) Nine recipes containing (the meat of) fish, like *rohita*. Thus, in total there are 115 enema-recipes with the meat of these animals and birds.

(16) [Godhādya Yāpanā-basti]

गोधानकुलमार्जारमूषिकशल्लकमांसानां दशपलान् भागान् सपञ्चमूलान् पयसि पक्त्वा तत्पयःपिप्पलीफलकल्कसैन्धवसौवर्चलशर्करामधुघृततैलयुक्तो बस्तिर्बल्यो रसायनः क्षीणक्षतस्य सन्धानकरो मथितोरस्करथगजहयभग्नवातबलासकप्रभृत्युदावर्तवातसक्तमूत्रवर्चश्शुक्राणां हिततमश्च (५);

Drugs belonging to the group of *pañca-mūla* (*bilva, śyonāka, gambhārī, pāṭalā* and *gaṇikārikā*) and ten *palas* of the meat of iguana (*godhā*), mongoose (*nakula*), cat (*mārjāra*) and mouse (*mūṣikā*) should be cooked by adding milk. To this liquid (containing milk), the paste of *pippalī* and *phala (madana-phala)* should be added. This should further be added with rock-salt, *sauvarcala,* sugar, honey, ghee and oil, and used for enema.

Enema with this recipe is exceedingly useful for the following :

(1) Promotion of strength;

(2) Rejuvenation of the body;

(3) Healing the phthisis-lesion;

(4) Curing ailments caused by the compression of the chest;

(5) Correcting fractures caused by riding *ratha* (wooden cart), elephant and horse;

(6) Curing *vāta-balāsaka* (an ailment caused by the simultaneous aggravation of *vāyu* and *kapha*), and such other diseases; and

(7) Curing *udāvarta* (upward movement of wind in the abdomen) and retention of urine, stool as well as semen caused by the aggravation of *vāyu*. [18 (5)]

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(17) [Kūrmādya Yāpanā-basti and Ten Other Extension Recipes]

कूर्मादीनामन्यतमपिशितसिद्धं पयो गोवृषनागहयनक्रहंसकुक्कुटाण्डरसमधुघृतशर्करासैन्धवेक्षुरकात्मगुप्ताफलकल्कसंसृष्टो बस्तिर्वृद्धानामपि बलजननः (६);

The meat of any one of *kūrma* (tortoise)-group of aquatic animals, should be boiled with milk. This milk should be added with the soup of the testicles of *vṛṣa* (bull), elephant and horse, the sap of the eggs of *nakra* (crocodile), *haṃsa* (swan) and *kukkuṭa* (hen), honey, ghee, sugar and rock-salt. To this, the paste of *ikṣuraka* as well as the fruit of *ātma-guptā* should be added, and used for enema.

Enema with these recipes promote strength of even an old person. [18 (6)]

The term '*kūrmādya*' meaning '*kūrma*, etc.,' includes ten other animals like *karkaṭa* (crab), *matsya* (fish), *śiśumāra* (esturine crocodile), *timiṅgila* (whale), *śukti* (pearl oyster), *śaṅkha* (conch-shell), *uḍra* (cat-fish), *kumbhīra* (crocodile), *culuki* (gangetic dolphin) and *makara* (great Indian crocodile) in addition to *kūrma* (tortoise). The recipe prepared with the meat of tortoise is to be enumerated as one of the 29 main recipes. The other ten prepared with the remaining ten animals described before are to be treated as extension recipes.

(18) [Karkaṭa-rasādya Yāpanā-basti]

कर्कटकरसश्चटकाण्डरसयुक्तः समधुघृतशर्करो बस्तिः, इत्येते बस्तयः परमवृष्याः उच्चटकेक्षुरकात्मगुप्ताशृतक्षीरप्रतिभोजनानुपानात् स्त्रीशतगामिनं नरं कुर्युः (७);

Soup of the meat of *karkaṭaka* (crab) added with the sap of the egg of *caṭaka,* honey, ghee and sugar should be used as enema.

Enema with these recipes are exceedingly aphrodisiac. If milk boiled with *uccaṭaka; ikṣuraka (kokilākṣa)* and *ātma-guptā* is taken after the administration of these enemas, then the person becomes capable of having sexual intercourse with many (lit. hundred) women. [18 (7)]

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[Cakrapāṇi has enumerated this as the enema-recipe, and the subsequent one as the eighteenth recipe. Perhaps the text of this work available with him had different paragraphic order. We have, however, given the number to this recipe in the order in which it appears in the present edition of the text.]

The term "*ityete bastayaḥ*" meaning "these enemas" refers to the effects of 17th, 18th & 19th recipes. [The last one is placed before this recipe by Cakrapāṇi.]

(19) [Go-vṛṣādya Yāpanā-basti]

गोवृषबस्तवराहवृषणकर्कटचटकसिद्धं क्षीरमुच्चटकेक्षुरकात्मगुप्ता-मधुघृतसैन्धवयुक्तः किंचिल्लवणितो बस्तिः (८);

Milk boiled with the testicles of *go-vṛṣa* (bull), goat and pig, *karkaṭaka* and *caṭaka* should be added with [the paste of] *uccaṭa, ikṣuraka* (*kokilākṣa*) and *ātma-guptā*, honey, ghee, rock-salt and small quantity of sea-salt, and used for enema.

[Enema with this recipe is exceedingly aphrodisiac, and it enables a person to indulge in sex with many women.]

[18 (8)]

(20) [Daśamūlādya Yāpanā-basti]

दशमूलमयूरहंसकुक्कुटक्वाथात् पञ्चप्रसृतं तैलघृतवसामज्जचतुष्प्रसृत-युक्तं शतपुष्पामुस्तहपुषाकल्कीकृतः सलवणो बस्तिः पादगुल्फोरुजानुजङ्घा-त्रिकवङ्क्षणबस्तिवृषणानिलरोगहरः (९);

To five *prasṛtas* of the decoction of *daśa-mūla* (*bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śāla-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*) and the meat of peacock, swan as well as domestic fowl, four *prasṛtas* of oil, ghee, *vasā* (muscle-fat) and *majjā* (bone-marrow) should be added. This liquid should be added with the paste of *śata-puṣpā, mustā* and *hapuṣā*. By adding salt (rock-salt), this recipe should be used for enema.

This enema cures *vātika* diseases afflicting feet, ankle-joints, thighs, knee-joints, calf-region, lumbar region, groins, urinary bladder region and testicles. [18 (9)]

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Extenstion of Recipe No. Twenty

मृगविष्किरानूपबिलेशयानामेतेनैव कल्पेन बस्तयो देयाः (१०);

Following the above mentioned procedure, enema should be given with the meat of the following categories of animals and birds :

(1) *Mṛga* (animals inhabiting dry land/forests);

(2) *Viṣkira* (gallinaceous birds);

(3) *Ānūpa* (animals inhabiting marshy land); and

(4) *Bileśaya* (animals living in the burrows in earth).

[18 (10)]

These extension recipes are 59 in number as follows :

(1) Seventeen recipes with the meat of *mṛgas* (animals living in dry land forests - vide *Sūtra* 27 : 45-46).

(2) Nineteen recipes with the meat of *viṣkiras* (gallinaceous birds — vide *Sūtra* 27 : 47-49). Out of the 21 gallinaceous birds described in *Sūtra-sthāna, mayūra* (peacock) and *kukkuṭa* (domestic fowl) are to be excluded because recipe with their meat is already described in the recipe no. 20.

(3) Nine recipes with the meat of *ānūpas* (marshy land inhabiting animals-vide *Sūtra* 27:39).

(4) Fourteen recipes with the meat of *bileśayas* (animals living in burrows in the earth - vide *Sūtra* 27 : 39). [Our translation of this text on p. 501 of Vol. I of this work is in conformity with Cakrapāṇi's view here.]

(21) [Madhvādya Yāpanā-basti]

मधुघृतद्विप्रसृतस्तुल्योष्णोदकः शतपुष्पार्धपलः सैन्धवार्धाक्षयुक्तो बस्तिर्वृष्यतमो मूत्रकृच्छ्रपित्तवातहरः (११);

Two *prasṛtas* of *madhu* (honey) and *ghṛta* (ghee) should be added with two *prasṛtas* of warm water. To this, half *pala* [of the paste] of *śata-puṣpā* and half *akṣa* of rock-salt should be added. Enema with this recipe is exceedingly aphrodisiac. It cures *mūtra-kṛcchra* (dysuria), and diseases caused by *pitta* as well as *vāyu*. [18 (11)]

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(22) [Sadyo-ghṛtādya Yāpanā-basti]

सद्योघृततैलवसामज्जचतुष्प्रस्थं हपुषार्धपलं सैन्धवार्धाक्षयुक्तो बस्तिर्वृष्यतमो मूत्रकृच्छ्रपित्तव्याधिहरो रसायनः (१२);

Four *prasthas* of freshly collected ghee, oil, *vasā* (muscle-fat) and *majjā* (bone-marrow) should be added with [the paste of] half *pala* of *hapuṣā,* and half *akṣa* of rock-salt, and used for enema.

This enema is exceedingly aphrodisiac. It cures *mūtra-kṛcchra* (dysuria) and diseases caused by *pitta*. It rejuvenates the body. [18 (12)]

(23) [Madhu-tailādya Yāpanā-basti]

मधुतैलं चतुःप्रसृतं शतपुष्पार्धपलं सैन्धवार्धाक्षयुक्तो बस्तिर्दीपनो बृंहणो बलवर्णकरो निरुपद्रवो वृष्यतमो रसायनः क्रिमिकुष्ठोदावर्तगुल्मार्शोब्रध्नप्लीहमेहहरः (१३);

Four *prasṛtas* of *madhu* (honey) and *taila* (oil) should be added with [the paste of] half *pala* of *śata-puṣpā,* and half *akṣa* of rock-salt.

Enema with this recipe produces the following effects :

(1) Stimulates the power of digestion (*dīpana*);

(2) Nourishes the body (*bṛṃhaṇa*);

(3) Promotes strength and complexion (*bala-varṇa-kara*);

(4) Produces no harmful effects (*nirupadrava*);

(5) Promotes virility exceedingly (*vṛṣyatama*);

(6) Rejuvenates the body (*rasāyana*);

(7) Cures *krimi* (parasitic infestation), *kuṣṭha* (obstinate skin diseases including leprosy), *udāvarta* (upward movement of wind in the abdomen), *gulma* (phantom tumour), *arśas* (piles), *bradhna* (inguinal swelling), *plīhan* (splenic disorder) and *meha* (obstinate urinary disorders including diabetes). [18 (13)]

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(24) [Madhu-ghṛtādya Yāpanā-basti - First Recipe]

तद्वन्मधुघृताभ्यां पयस्तुल्यो बस्तिः पूर्वकल्केन बलवर्णकरो वृष्यतमो निरुपद्रवो बस्तिमेढ्रपाकपरिकर्तिकामूत्रकृच्छ्रपित्तव्याधिहरो रसायनश्च (१४);

Similarly, *madhu* (honey) and *ghṛta* (ghee), added with equal quantity of milk should be mixed with the paste of drugs described above (in recipe no. 23).

Enema with this recipe has the following effects :

(1) It promotes strength and complexion (*bala-varṇa-kara*);

(2) It produces aphrodisiac effect exceedingly (*vṛṣyatama*);

(3) It causes no adverse effects (*nirupadrava*);

(4) It cures inflammation of urinary bladder and phallus (*basti-meḍhra-pāka*), sawing pain (*parikartikā*), dysuria (*mūtra-kṛcchra*) and diseases caused by *pitta*; and

(5) It rejuvenates the body (*rasāyana*). [18 (14)]

[According to Cakrapāṇi, six recipes (no. 19 to 24) ending with the present one, are called *Madhu-tailika-basti* because honey (*madhu*) and oil (*taila*) are predominantly used in these recipes. But excepting recipe no. 23, none others of these recipes contain honey and oil predominantly. He perhaps had a different text.]

(25) [Madhu-ghṛtādya Yāpanā-basti -- Second Recipe]

तद्वन्मधुघृताभ्यां मांसरसतुल्यो मुस्ताक्षयुक्तः पूर्ववद्बस्तिर्वातबलासपाद-हर्षगुल्मत्रिकोरुजानुनिकुञ्चनबस्तिवृषणमेढ्रत्रिकपृष्ठशूलहरः (१५);

Similarly, honey (*madhu*) and ghee (*ghṛta*) should be added with equal quantity of meat-soup and [the paste of] one *akṣa* of *mustā*. This enema-recipe prepared according to earlier procedure (recipe no. 23) cures *vāta-balāsa* (an ailment caused by aggravated *vāyu* and *kapha*), *pāda-harṣa* (tingling sensation in the feet), *gulma* (phantom tumour), contraction (stiffness) of lumbar region, thighs and knee-joints, and pain

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in the region of urinary bladder, scrotum, phallus, lumbar region and back. [18 (15)]

[This enema-recipe is not numbered in Cakrapāṇi's commentray.]

(26) [Surādya Yāpanā-basti]

सुरासौवीरककुलत्थमांसरसमधुघृततैलसप्तप्रसृतो मुस्तशताह्वाकल्कितः सलवणो बस्तिः सर्ववातरोगहरः (१६);

Seven *prasṛtas* of *surā* (a type of alcohol), *sauvīraka* (vinegar), *kulattha*-soup, meat-soup, honey, ghee and oil should be added with the paste of *mustā* and *śatāhvā*. This recipe added with salt may be used for enema which cures all the *vātika* diseases. [18 (16)]

[This recipe is not enumerated in Cakrapāṇi's commentary.]

[Dvi-pañca-mūlādya Yāpanā-basti]

द्विपञ्चमूलत्रिफलाबिल्वमदनफलकषायो गोमूत्रसिद्धः कुटजमदनफल-मुस्तपाठाकल्कितः सैन्धववयावशूकक्षौद्रतैलयुक्तो बस्तिः श्लेष्मव्याधिबस्त्या-टोपवातशुक्रसङ्गपाण्डुरोगाजीर्णविसूचिकालसकेषु देय इति।। १८।।

Two types of *pañca-mūla* (roots of *bilva, śyonāka, gambhārī, pāṭalā, gaṇikārikā, śala-parṇī, pṛśni-parṇī, bṛhatī, kaṇṭakārī* and *gokṣura*), *triphalā* (*harītakī, bibhītaka* and *āmalakī*), *bilva* (fruit) and *madana-phala* should be boiled by adding cow's urine. To this decoction, the paste of *kuṭaja, madana-phala, mustā* and *pāṭhā* should be added. By adding rock-salt, *yava-kṣāra* (an alkali preparation of barley), honey and oil, this recipe should be used for enema.

This enema should be used for the treatment of diseases caused by *kapha, bastyāṭopa* (flatulence in the region of the urinary bladder), retention of flatus and semen, anemia, indigestion, *visūcikā* (choleric diarrhoea) and *alasaka* (intestinal torpor). [18]

[According to Cakrapāṇi, some scholars do not accept this text as authentic becuase it adds one more recipe to the total no. of 29 as summarised in the verse no. 27, and also because this recipe is already described in *Siddhi* 3 : 59-60. Therefore, we have left it unnumbered.]

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Recipes of Anuvāsana-basti

(27) [Śatāvaryādi Sneha-basti]

अत ऊर्ध्वं वृष्यतमान् स्नेहान् वक्ष्यामः—शतावरीगुडूचीक्षुविदार्यामलकद्राक्षाखर्जूराणां यन्त्रपीडितानां रसप्रस्थं पृथगेकैकं तद्वद्घृततैलगोमहिष्यजाक्षीराणां द्वौ द्वौ दद्यात्, जीवकर्षभकमेदामहामेदात्वक्क्षीरीशृङ्गाटकमधूलिकामधुकोच्चटापिप्पलीपुष्करबीजनीलोत्पलकदम्बपुष्पपुण्डरीककेशरकल्कान् पृषततरक्षुमांसकुक्कुटचटकचकोरमत्ताक्षबर्हिजीवञ्जीवकुलिङ्गहंसाण्डरसवसामज्जादेश्च प्रस्थं दत्त्वा साधयेत्। ब्रह्मघोषशङ्खपटहभेरीनिनादैः सिद्धं सितच्छत्रकृतच्छायं गजस्कन्धमारोपयेद्भगवन्तं वृषध्वजमभिपूज्य, तं स्नेहं त्रिभागमाक्षिकं मङ्गलाशीःस्तुतिदेवतार्चनैर्बस्तिं गमयेत्। नृणां स्त्रीविहारिणां नष्टरेतसां क्षतक्षीणविषमज्वरार्तानां व्यापन्नयोनीनां वन्ध्यानां रक्तगुल्मिनीनां मृतापत्यानामनार्तवानां च स्त्रीणां क्षीणमांसरुधिराणां पथ्यतमं रसायनमुत्तमं वलीपलितनाशनं विद्यात् (१);

Now we shall describe oleating recipes having excellent aphrodisiac effect.

One *prastha* each of the juice of *śatāvarī, guḍūcī, ikṣu, vidārī, āmalakī, drākṣā* and *kharjūra* should be taken out separately with the help of instruments (mechanically). To this, two *prasthas* each of ghee, oil, cow's milk, buffalo-milk and goat-milk should be added. This should then be added with the paste of *jīvaka, ṛṣabhaka, medā, mahā-medā, tvakkṣīrī (vaṃśa-locana), śṛṅgāṭaka, madhūlikā, madhuka, uccaṭā, pippalī,* seeds of *puṣkara, nīlotpala,* flower of *kadamba, puṇḍarīka* and *keśara*. The recipe should be cooked by adding one *prastha* of the meat-soup of *pṛṣata* and *tarakṣu,* and the sap of the eggs of *kukkuṭa, caṭaka, cakora, mattākṣa* (*kokila*), *barhi, jīvañjīvaka, kuliṅga* and *haṃsa, vasā* (muscle-fat), *majjā* (bone-marrow), etc.

After having worshipped Lord Śiva, this cooked *sneha* (medicated fat) should be placed on the back of an elephant with a white umbrella held over it, while chanting Vedic mantras and blowing conch-shell accompanied with the beating sound of *paṭaha* (hand-drum) as well as *bherī* (kettle drum).

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To this medicated fat, honey, one-third in quantity thereof, should be added. With auspicious benedictions, prayers and worshipping of the gods, this recipe should be administered as enema.

This enema-recipe is exceedingly wholesome for the following :

(1) Persons indulging in sexual act in excess;

(2) Persons suffering from loss of semen;

(3) Patients suffering from *kṣata-kṣīṇa* (phthisis) and *viṣama-jvara* (irregular fever);

(4) Women suffering from gynecic disorders, sterility and *rakta-gulma* (uterine tumour);

(5) Women whose offsprings succumb to death before or after delivery;

(6) Women suffering from amenorrhoea; and

(7) Persons having diminished muscle-tissue and blood.

It is an excellent *rasāyana* (rejuvenating therapy), and it cures appearance of wrinkles on the skin (*valī*) and graying of hair (*palita*). [19 (1)]

[Cakrapāṇi has interpreted '*puṣkarākṣa*' as "a type of swan". But this term does not appear in the above text. Perhaps he had a slightly different text.] The chanting of mantras, etc. is prescribed here in order to counteract envisible demoniac focus, attaching human mud and body.

(28) [Balādya Sneha-basti]

बलागोक्षुरकरास्नाश्वगन्धाशतावरीसहचराणां शतं शतमापोथ्य जलद्रोणशते प्रसाध्यं, तस्मिन् जलद्रोणावशेषे रसे वस्त्रपूते विदार्यामलकस्वरसयोर्बस्तमहिषवराहवृषकुक्कुटबर्हिहंसकारण्डवसारसाण्डरसानां घृततैलयोश्चैकैकं प्रस्थमष्टौ प्रस्थान् क्षीरस्य दत्त्वा चन्दनमधुकमधूलिकात्वक्क्षीरीबिसमृणालनीलोत्पलपटोलात्मगुप्तान्नपाकितालमस्तकखर्जूरमृद्वीकातामलकीकण्टकारीजीवकर्षभकक्षुद्रसहामहासहाशतावरीमेदापिप्पलीह्रीबेरत्वक्पत्रकल्कांश्च दत्त्वा साधयेत्। ब्रह्मघोषादिना विधिना सिद्धं बस्तिं दद्यात्। तेन स्त्रीशतं गच्छेत्; न चात्रास्ते विहाराहारयन्त्रणा काचित्। एष वृष्यो बल्यो

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बृंहण आयुष्यो वलीपलितनुत् क्षतक्षीणनष्टशुक्रविषमज्वरार्तानां व्यापन्नयोनीनां च पथ्यतमः (२);

One hundred *palas* of each of *balā, gokṣuraka, rāsnā, aśvagandhā, śatāvarī* and *sahacara* should be crushed into small pieces and boiled by adding one hundred *droṇas* of water till one-fourth of the liquid remains. This liquid should then be filtered out by a cloth. This should then be cooked by adding the following ingredients :

(1) One *prastha* each of the juice of *vidārī* and *āmalakī*;

(2) One *prastha* each of the meat-soup of goat, buffalo, pig and bull;

(3) One *prastha* each of the saps of the eggs of domestic fowl, pea-hen, swan, *kāraṇḍava* and *sārasa;*

(4) One *prastha* each of ghee and oil;

(5) Eight *prasthas* of milk; and

(6) Paste of *candana, madhuka, madhūlikā, tvak-kṣīrī (vaṃśa-locana), bisa, mṛṇāla, nīlotpala, paṭola, ātma-guptā, anna-pāki (odana-pāki), tāla-mastaka, kharjūra, mṛdvīkā, tāmalakī, kaṇṭakārī, jīvaka, ṛṣabhaka, kṣudra-sahā (mudga-parṇī), mahā-sahā (māṣa-parṇī), śatāvarī, medā, pippalī, hrībera, tvak* and *patra.*

Following the procedure of the recitation of Vedic mantras and such other rituals described earlier (in respect of recipe no. 27), enema with this recipe should be given.

By this enema a person becomes capable of having sexual intercourse with many (lit. hundred) women. This enema does not involve any restriction of diet or regimen on the part of the patient. It promotes virility, strength, corpulence and longevity. It cures wrinkles (*valī*) on the skin and graying of hair (*palita*). It is exceedingly wholesome for patients suffering from phthisis, loss of semen, *viṣama-jvara* (irregular fever) and gynecic disorders. [19 (2)]

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(29) [Sahacarādya Sneha-basti]

सहचरपलशतमुदकद्रोणचतुष्टये पक्त्वा द्रोणशेषे रसे सुपूते विदारी-क्षुरसप्रस्थाभ्यामष्टगुणक्षीरं घृततैलप्रस्थं बलामधुकमधूकचन्दनमधूलिकासा-रिवामेदामहामेदाकाकोलीक्षीरकाकोलीपयस्यागुरुमञ्जिष्ठाव्याघ्रनखशटी-सहचरसहस्रवीर्यावराङ्गलोध्राणामक्षमात्रैर्द्विगुणशर्करैः कल्कैः साधयेत्। ब्रह्मघोषादिना विधिना सिद्धं बस्तिं दद्यात्। एष सर्वरोगहरो रसायनो ललितानां श्रेष्ठोऽन्तःपुरचारिणीनां क्षतक्षयवातपित्तवेदनाश्वासकासहरस्त्रि-भागमाक्षिको वलीपलितनुद्वर्णरूपबलमांसशुक्रवर्धनः (३);

One hundred *palas* of *sahacara* should be added with four *droṇas* of water, and cooked till one *droṇa* of the liquid remains. This decoction should then be strained out, and cooked by adding the following ingredients :

(1) One *prastha* each of the juice of *vidārī* and sugar-cane;

(2) Sixteen *prasthas* of milk;

(3) One *prastha* each of ghee and oil;

(4) Paste of one *akṣa* each of *balā, madhuka, madhūka, candana, madhūlikā, sārivā, medā, mahā-medā, kākolī, kṣīra-kākolī, payasyā, aguru, mañjiṣṭhā, vyāghra-nakha, śaṭī, sahacara, sahasra-vīryā (dūrvā), varāṅga (guḍa-tvak)* and *lodhra*, and two *akṣas* of sugar.

This recipe should be administered as enema while reciting Vedic *mantras* and performing other sacred rituals.

This enema has the following effects :

(1) It is a panacea for all the diseases;

(2) It rejuvenates the body;

(3) It is the best therapy for delicate women living in harems;

(4) It cures *kṣata-kṣīṇa* (phthisis), pain caused by *vāyu* and *pitta*, asthma and cough; and

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(5) When used by adding honey, one third in quantity of the recipe, it cures wrinkles (*valī*), graying of hair (*palita*), and promotes colour, complexion, beauty strength, muscle tissues and semen. [19 (3)]

Augmenting Potency of Basti Recipes

इत्येते रसायनाः स्नेहबस्तयः सति विभवे शतपाकाः सहस्रपाका वा कार्या वीर्यबलाधानार्थमिति।। १९।।

If the patient is affluent enough, then the above mentioned rejuvenating *sneha-bastis* (unctuous enemas) should be prepared by cooking for one hundred times (*śata-pāka*) or one thousand times (*sahasra-pāka*) for the promotion of their potency and strength. [19]

For *śata-pāka* and *sahasra-pāka*, some physicians cook the fat (ghee and oil) only once by adding 100 or 1000 times of the prescribed liquids.

Recapitulation

भवन्ति चात्र–
इत्येते बस्तयः स्नेहाश्चोक्ता यापनसंज्ञिताः।
स्वस्थानामातुराणां च वृद्धानां चाविरोधिनः।। २०।।
अतिव्यवायशीलानां शुक्रमांसबलप्रदाः।
सर्वरोगप्रशमनाः सर्वेष्वृतुषु यौगिकाः।। २१।।
नारीणामप्रजातानां नराणां चाप्यपत्यदाः।
उभयार्थकरा दृष्टाः स्नेहबस्तिनिरूहयोः।। २२।।

The above mentioned oleating enema-recipes are called *Yāpana-bastis*. These are not contra-indicated either for healthy persons or for patients or for old persons. They promote semen and muscular tissue of persons, excessively indulging in sex. These are panaceas for all diseases, and are suitable for administration in all the seasons. They help sterile women and men to budget offsprings. These recipes are suitable for both, *sneha-basti* (unctuous enema) and *nirūha-basti* (evacuative enema). [20 - 22]

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These recipes of *yāpana-basti* serve both the purposes of *snehana* (oleation) and *śodhana* (elimination of morbid material from the body).

Prohibitions

व्यायामो मैथुनं मद्यं मधूनि शिशिराम्बु च।
संभोजनं रथक्षोभो बस्तिष्वेतेषु गर्हितम्।। २३।।

While using the above mentioned *yāpana-bastis*, the patient should avoid physical exercise, sexual intercourse, intake of alcohol, intake of different types of honey and cold water, eating full meal and jolting by conveyances. [23]

Summary

तत्र श्लोकाः-
शिखिगोनर्दहंसाण्डैर्दक्षवद्बस्तयस्त्रयः ।
विंशतिर्विष्किरैस्त्रिंशत्प्रतुदैः प्रसहैर्नव।। २४।।
विंशतिश्च तथा सप्तविंश तेश्चाम्बुचारिभिः।
नव मत्स्यादिभिश्चैव शिखिकल्पेन बस्तयः।। २५।।
दश कर्कटकाद्यैश्च कूर्मकल्पेन बस्तयः।
मृगैः सप्तदशैकोनविंशतिर्विष्किरैर्नव।। २६।।
आनूपैर्दक्षशिखिवद्भूशयैश्च चतुर्दश।
एकोनत्रिंशदित्येते सह स्नेहैः समासतः।। २७।।
प्रोक्ता विस्तरशो भिन्ना द्वे शते षोडशोत्तरे।

Thus, in brief, twenty nine *yāpana-bastis* including three *sneha-bastis* are described above. In addition, the following extended catagories of enema-recipes are also described :

I (1) to (3) Three *bastis* with the eggs of *śikhi* (pea-hen), *gonarda* (adjutant) and *haṃsa* (swan) which are to be prepared in the same way like the method described for the egg of hen in para no. 16(12). [vide para no. 17]

II (4) to (118) Twenty recipes with the meat of *viṣkiras* (gallinaceous birds), thirty recipes with *pratudas* (pecker birds), 29 recipes with

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prasahas (animals who eat by snatching food), 27 with aquatic animals, and nine recipes with fish, etc., which are to be prepared on the line suggested for the enema-recipe with the meat of pea-cock in para 18(3). [vide para no. 18(4)]

III (119) to (128) Ten recipes with the meat of *karkaṭa*, etc., which are to be prepared on the line suggested for *kūrma* in para no. 18(6).

IV (129) to (187) Seventeen recipes with the meat of *mṛgas* (animals dwelling in dryland forests), ninteen recipes with the meat of *viṣkiras* (gallinaceous birds), nine recipes with the meat of *ānūpas* (marshy land inhabiting animals), and fourteen recipes with *bhūśayas* (animals living in burrows on the earth) which are to be prepared on line suggested for the recipes of domestic fowl and pea-cock in para no. 18(9). [vide para no. 18(10)]

Thus, when classified in detail, the 29 original recipes and 187 extended recipes make for 216 recipes in total.

[24-27$^{1}/_{2}$]

Augmenting Potency of Recipes

एते माक्षिकसंयुक्ताः कुर्वन्त्यतिवृषं नरम्।। २८।।
नातियोगं न वाऽयोगं स्तम्भितास्ते च कुर्वते।

Use of the above mentioned enema-recipes by adding honey makes a person exceedingly virile. When fortified (with honey), they do not allow any over-action (*ati-yoga*) or under-action (*ayoga*). [28$^{1}/_{2}$ - $^{1}/_{2}$ 29]

Management of Non-eliminated Recipes

मृदुत्वान्न निवर्तन्ते यस्य त्वेते प्रयोजिताः।। २९।।
समूत्रैर्बस्तिभिस्तीक्ष्णैरास्थाप्यः क्षिप्रमेव सः।

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If, because of mild nature, the administered enema-recipes, described above, do not get eliminated, then immediately *āsthāpana-basti* (evacuative enema) containing cow's urine and other sharp ingredients should be given.

[29 $^{1}/_{2}$ - $^{1}/_{2}$ 30]

Adverse Effects of Excessive Use of Yāpana-bastis, and Their Management

शोफाग्निनाशपाण्डुत्वशूलार्शःपरिकर्तिकाः ।। ३०।।
स्युर्ज्वरश्चातिसारश्च यापनात्यर्थसेवनात्।
अरिष्टक्षीरसीध्वाद्या तत्रेष्टा दीपनी क्रिया।। ३१।।
युक्त्या तस्मान् निषेवेत यापनान्न प्रसङ्गतः।

Excessive use of these *yāpana-bastis* gives rise to oedema, loss of the power of digestion, anemia, colic pain, piles, *parikartikā* (sawing pain), fever and diarrhoea.

For the treatment of these ailments, the patient should be given *ariṣṭas* (medicated wines), milk, *sīdhu* (a type of alcohol), etc., and therapies for the promotion of digestion.

Therefore, *yāpana-basti* should be used judiciously, and should not be used continuously (as a matter of habit).

[30$^{1}/_{2}$ - $^{1}/_{2}$ 32]

Impediments and Their Management

इत्युच्चैर्भाष्यपूर्वाणां व्यापदः सचिकित्सिताः।। ३२।।
विस्तरेण पृथक् प्रोक्तास्तेभ्यो रक्षेन्नरं सदा।

Different factors (e.g. loud speech) which cause impediments, and their management are separately described earlier in detail (in verse/para nos. 10-15).

The patient should always be guarded against these impeding factors. [32$^{1}/_{2}$ - $^{1}/_{2}$ 33]

Definition of "Siddhi-sthāna"

कर्मणां वमनादीनामसम्यक् करणापदाम्।। ३३।।
यत्रोक्तं साधनं स्थाने सिद्धिस्थानं तदुच्यते।

The section (*sthāna*) describing the successful (*siddhi*)

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administration of elimination therapy (emesis, etc.), the complications arising out of their mal-administration, and management of these complications is called "*Siddhi-sthāna*". [33 $^1/_2$ - $^1/_2$ 34]

In addition to the topics described in the text above, *Siddhi-sthāna* also deals with the preparation of recipes for emesis, etc., and prevention of complications because of non-elimination of ingredients of the recipe.

Merits Achieved by Study

इत्यध्यायशतं विंशमात्रेयमुनिवाङ्मयम्।। ३४।।
हितार्थं प्राणिनां प्रोक्तमग्निवेशेन धीमता।
दीर्घमायुर्यशः स्वास्थ्यं त्रिवर्गं चापि पुष्कलम्।। ३५।।
सिद्धिं चानुत्तमां लोके प्राप्नोति विधिना पठन्।

Thus, this treatise comprising one hundred and twenty chapters which expounds the statements of the sage Ātreya was propounded by Agniveśa, endowed with therapeutic wisdom for the benefit of all the living beings.

The systematic study of this treatise endows a person with longevity, fame, health, abundant fulfilment of the three basic desiderata of life and unsurpassable professional accomplishment in this world. [34 $^1/_2$ - $^1/_2$ 36]

Agniveśa, while composing this treatise followed the statements of his preceptor Ātreya.

Tri-varga or the three basic desiderata of human beings are : *dharma* (performance of duties), *artha* (satisfaction of senses with their objects or acquirement of wealth) and *kāma* (fulfilment of desires).

The term '*puṣkala*' implies *mokṣa* or salvation which is the fourth basic desire of human beings. Alternatively, it may be treated as an epithet of the term '*trivarga*' meaning thereby 'abundant' fulfilments of the three basic desire of desiderata of life.

The term '*siddhi*' (accomplishment) implies the perfection achieved by the administration of therapies for the treatment of diseases.

"*Vidhinā paṭhan*" (systematic studies) implies the procedure of study as described in *Vimāna* 8 : 7.

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Study of these 120 chapters of this treatise as stated above endows a person with longevity, etc. These effects are produced by the religious merits obtained by the study of this sacred text, and also by the initiation of measures as expounded in the treatise after its proper comprehension.

Pratisaṃskartā or Redactor

विस्तारयति लेशोक्तं संक्षिपत्यतिविस्तरम्।। ३६।।
संस्कर्ता कुरुते तन्त्रं पुराणं च पुनर्नवम्।
अतस्तन्त्रोत्तममिदं चरकेणातिबुद्धिना।। ३७।।
संस्कृतं तत्त्वसम्पूर्णं त्रिभागेनोपलक्ष्यते।

A redactor expands the concise statements and abbreviates the very prolix ones in an old work, and thus, puts it in a new (revised) form.

Therefore, Caraka, possessed with excellent wisdom redacted this illustrious treatise, which however, is incomplete inasmuch as (almost) one-third of this redacted text was missing (not available at the time of Dṛḍhabala).

[$36^{1}/_{2}$ - $^{1}/_{2}$ 38]

In the original work of Agniveśa, some topics were dealt with in great detail, and some others too very briefly which hindered its proper comprehension. To remove these defects, the redactor made efforts. This redaction was done by Caraka.

A detailed description of various topics provided in the original text was no doubt, suitable for the then readers (students). But it was redacted to enable the scholars of these days (at the time of redaction) to understand the text properly. [Thus, the original text was not defective. It was good enough for the readers (students) of that period. Along with the passage of time, the requirement of the readers changed for which a redaction of the text was felt necessary to cater to the needs of the readers of that period (of redaction).] As it is said, "a text in brief is not understandable and detailed text is not comprehensible. Therefore, an original old text is redacted to make it new which is neither too brief nor too prolix.

Agniveśa-saṃhitā, as redacted by Caraka had one hundred chapters. But at the time of Dṛḍhabala, one-third of this text was not available. The one-third of this text comes to forty chapters. As the subsequent statement in verse no. 40 indicates, Dṛḍhabala supplemented 41 non-

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available chapters. There is not much of difference between 40 and 41. Therefore, one should not consider the approximate statement of one-third or 40 chapters in the place of 41 as a mistake.

Dṛḍhabala and His Supplementations

तच्छङ्करं भूतपतिं संप्रसाद्य समापयत्।। ३८।।
अखण्डार्थं दृढबलो जातः पञ्चनदे पुरे।
कृत्वा बहुभ्यस्तन्त्रेभ्यो विशेषोञ्छशिलोच्चयम्।। ३९।।
सप्तदशौषधाध्यायसिद्धिकल्पैरपूरयत् ।
इदमन्यूनशब्दार्थं तन्त्रदोषविवर्जितम्।। ४०।।
षड्विंशता विचित्राभिर्भूषितं तन्त्रयुक्तिभिः।

Dṛḍhabala, born in *Pañca-nada-pura* (present Punjab) supplemented these (non-available) chapters after propitiating Lord Śiva, the protector of all creatures, to make the work complete.

By culling matter from several important treatises, he compiled and restored 17 chapters of *Cikitsā-sthāna*,and all the chapters of *Siddhi* as well as *Kalpa-sthānas*.

This text is not deficient in words (*śabda*) or their implications (*artha*) concerning medical science, and it is free from blemishes of textual compositions. In addition, it is decorated with 26 relevant *tantra-yuktis* (canons of scientific exposition). [$38^{1}/_{2}$ - $^{1}/_{2}$ 41]

Mention of *Pañca-nada-pura* as the place of birth implies that Dṛḍhabala was born in the best of the regions (*pradeśas*).

He has compiled data from other important (*viśeṣa*) treatises, viz., *Suśruta-saṃhitā, Videha-saṃhitā,* etc.

The term '*uñccha*' implies collection of small grains (lying in the farm after harvesting). The term '*śila*' implies collection (*cayana*) of essential (*sāra*) small grains scattered here and there in the farm.

The term *"viśeṣoñccha-śiloccayam"*, therefore, suggests that Caraka had compiled the essence of the treatises, and Dṛḍhabala had compiled the left out data (like left out grains) from these treatises. [This shows the humility or modesty of Dṛḍhabala.]

Blemishes of treatises are fourteen in number, and they are explained in *Vimāna* 8 : 3.

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Tantra-yuktis (Canons of Exposition)

तत्राधिकरणं योगो हेत्वर्थोऽर्थः पदस्य च।। ४१।।
प्रदेशोद्देशनिर्देशवाक्यशेषाः प्रयोजनम्।
उपदेशापदेशातिदेशार्थापत्तिनिर्णयाः ।। ४२।।
प्रसङ्गैकान्तनैकान्ताः सापवर्गो विपर्ययः।
पूर्वपक्षविधानानुमतव्याख्यानसंशयाः ।। ४३।।
अतीतानागतावेक्षास्वसंज्ञोह्यसमुच्चयाः ।
निदर्शनं निर्वचनं संनियोगो विकल्पनम्।। ४४।।
प्रत्युत्सारस्तथोद्धारः संभवस्तन्त्रयुक्तयः।

Tantra-yuktis or canons of composition are as follows :

(1) *Adhikaraṇa* or subject matter

(The central theme the author intends to expound in a treatise which the author composes a treatise. For example, in *Sūtra* 1 : 6-7, it is stated that this *āyurvedic* treatise is presented in order to prevent and cure diseases which are impediments to the path of an individual willing to perform righteous on the context of duties. Here the diseases, the treatise, etc. constitute the *adhikaraṇa* or the central theme.)

(2) *Yoga* or union

(Justifying a statement by putting together different words in order to explain the point from various angles. For example, origin of the embryo from maternal factor, etc., has been explained on the basis of logical terms like *pratijñā, hetu, udāharaṇa, upanaya* and *nigamana* in *Śārīra* 3 : 10-114.)

(3) *Hetvartha* or extension of argument

(When a statement is made in a particular context that is applicable to other situations as well. For example, in *Sūtra* 12 : 5, habitual intake of homologous matter is stated to increase *dhātus*. The term '*dhātu*' in this context implies *doṣas* as well besides tissue elements. The statement made here is in the context of *vāyu-doṣa*. The same principle is applicable to other situations like the augmentation of the quantity of *rasa*, etc.)

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(4) *Padārtha* or implication of words

(One, two or many words individually or jointly may carry specific (teachnical) meanings. For example, the term *'dravya'* stands for five *mahābhūtas* and *ātman,* and the two terms *''āyuṣaḥ vedaḥ''* (science of life) stand for the treatise on *āyurveda.)*

(5) *Pradeśa* or partial enunciation

(When there are many objectives of a topic and all of these cannot be explained in one place, then in a given situation, only a partial statement is made [in the form of a sample]. For example, in *Sūtra* 27 : 329 while explaining the properties of various types of *anupānas* or post-prandial drinks, it is stated, *''Anupānas* in their entirety cannot be explained, and only a part of these, including some of the commonly used ones are described.)

(6) *Uddeśa* or concise statement

(Making a concise statement having wider implications. For example, the scope of *āyurveda* is described in *Sūtra* 1 : 24 as *hetuliṅgauṣadhijñānaṃ,* i.e. the knowledge of the etiology, signs of treatment, or management of healthy persons and patients.)

(7) *Nirdeśa* or amplification

(The above mentiond concise statement has been amplified later. The explanation of *hetuliṅgauṣadhijñāna* is provided later in *Sūtra* 1 : 44-53.)

(8) *Vākya-śeṣa* or supply of ellipsis

(Sometimes, in order to make the statement lighter or smaller in size, certain parts of it are omitted, and this ellipsis has to be inferred with reference to the context. For example, in the statement *'pravṛttihetun bhāvānām'* (vide *Sūtra* 16 : 28), the verb *'asti'* has to be inferred though it is not specifically mentioned in the text. Without this verb the sentence is

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incomplete. Similarly, while describing the soup *(rasa)* of the meat *(māṃsa)* of animals inhabiting dry land forests *(jāṅgala)*, only *jāṅgalajaiḥ rasaiḥ* is mentioned (vide *Siddhi* 1 : 9). In this statement, the term *'māṃsa'* has to be inserted to make the meaning complete. Since it is not mentioned in the text, it has to be inferred.)

(9) *Prayojana* or object

(It is the purpose for which a treatise is composed. For example, the purpose of composing *Caraka-saṃhitā* is to provide information regarding measures to be adopted for achieving equilibrium of *doṣas* and *dhātus* — vide *Sūtra* 1 : 53)

(10) *Upadeśa* or authoritative instructions

(The preceptor's instructions are included in a treatise. For example, first of all oleation *(sneha)* therapy should be administered, and only thereafter, fomentation *(sveda)* therapy should be given to the patient — vide *Sūtra* 13 : 99.)

(11) *Apadeśa* or reasoning a statement

(When a statement is made, the reason for making such a statement should be provided. For example, among the pollutions of *vāyu* (air), *jala* (water), *deśa* (land) and *kāla* (time), the latter ones are more serious than the former ones because the latter ones are more unavoidable — vide *Vimāna* 3 : 10. This unavoidability *(duṣparihāryatva)* is the reason for making the statement.)

(12) *Atideśa* or indication

(A specific statement might indicate non-specified objects. For example, in *Sūtra* 9 : 34, it is stated, ''The regimens not specified in this chapter are also to be adopted if these are wholesome''.)

(13) *Arthāpatti* or implication

(A statement may imply an unspecified object. For

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example, it is stated in *Sūtra* 7 : 61, ''One should not take curd at night''. By implication, curd can be taken during the day time.)

(14) *Nirṇaya* or decision

(The conclusion drawn after proper examination. For example, it is stated in *Sūtra* 10 : 3, ''Sixteen aspects of treatment, four each relating to the physician, drug, attendant and patient, described earlier are *sine qua non* for good health provided these are applied appropriately''. This proper application *(yukti-yukta)* represents the decision *(nirṇaya)* after proper examination.)

(15) *Prasaṅga* or restatement

(A statement made earlier is repeated in view of contextuace. For example, the statement regarding the wrong utilization, etc., of senses made in *Sūtra* 11 : 37 is repeated in *Śārīra* 1 : 118-126 because of contextual propriety.)

(16) *Ekānta* or categorical statement

(In a general statement specific factors are mentioned in order to emphasise a specific point. For example, while describing the purgative effect of *trivṛt*, the term *''nijaḥ śarīradoṣotthaḥ''* meaning morbid matter *(doṣa)* of one's own *(nija)* body *(śarīra)*, is used. The term *'nija'* used here is just for emphasis.)

(17) *Anekānta* or compromising statement

(A statement made for explaining another view-point without upholding it. For example, while explaining the death of persons for want of medicines, it is stated that even the diseases of these persons are not (always) amenable to therapeutic measures — vide *Sūtra* 10 : 5.)

(18) *Apavarga* or exception

(A statement made regarding exceptions to general rules. For example, as a general rule, intake of stale food is prohibited.

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But in the case of meat, etc., the stale (dried) ones are not prohibited. In fact, as exceptions to the general rule, these are permitted — vide *Sūtra* 8 : 20.)

(19) *Viparyaya* or reconfirmation of implied opposite action

(A statement made to reconfirm the implied meaning. For example, it is stated that the factors responsible for the causation of the diseases are not wholesome for the patient. By implication, factors having opposite attributes are wholesome for the patient. But this is reconfirmed in another statement made subsequently — vide *Nidāna* 3 : 7.)

(20) *Pūrva-pakṣa* or amplification of earlier statement

(Sometimes a statement in general made earlier is partially modified. For example, having stated that all types of fish should not be taken with milk, the statement is amplified by the statement that *cilicima* type of fish specially should not be taken with milk — vide *Sūtra* 26 : 84.)

(21) *Vidhāna* or correct interpretation

(Sometimes a statement made earlier is further explained in order to bring out its correct implications. For example, the statement to the effect that the passages (of waste products) get afflicted by the vitiated *malas* or waste products, is interpretes in a subsquent statement pointing out that a feeling of heaviness in the passage implies the increase in the quantity, and lightness implies decrease in the quantity of waste products *(malas)* — vide *Sūtra* 7 : 42-43.

According to some, this term *'vidhāna'* means description in correct order. For example, tissue elements are described in their appropriate sequence, *rasa, rakta,* etc. — vide *Cikitsā* 15 : 16.)

(22) *Anumata* or confession

(Non-contradiction of a different view. For example, the

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author has quoted another view regarding the method to be followed for the extraction of the dead foetus, and has not contradicted it. By implication, the author has accepted it — vide *Śārīra* 8 : 31.)

(23) *Vyākhyāna* or explanation

(Explaining a topic to make it comprehensible by people having different intellectual quotients. For example, the condition of the foetus during the first month of pregnancy is described in detail — vide *Śārīra* 4 : 9.)

(24) *Saṃśaya* or doubt

(Description of different view-points on a selected topic leaving the conclusion uncertain. For example, the cause of procreation is described differently by various authors as mother (ovum), father (sperm), *svabhāva* (nature), *para-nirmāṇa* (super-natural force) or *yaddṛcchā* (accidental, not predetermined) — vide *Sūtra* 11 : 6.)

(25) *Atītāvekṣaṇa* or retrospective reference

(Sometimes, the text refers to the description of a given topic made earlier. For example, while describing the treatment of *jvara* (fever), a reference is made to the fomentaion therapy details of which were described earlier — *Cikitsā* 3 : 269.)

(26) *Anāgatāvekṣaṇa* or prospective reference

(Sometimes while describing a topic, a reference is made to a recipe which is to be described later. For example, while describing the treatment of fever, *Tikta-sarpis* is described to be used. Details of this recipe are, however, described later.)

(27) *Svasañjñā* or use of technical terms

(Sometimes, the author uses certain technical terms which are generally not found elsewhere. For example, *jentāka, holāka,* etc. — vide *Sūtra* 14 : 39-40.)

(28) *Ūhya* or deduction

(Sometimes, regarding a statement made in the text, the

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physician is advised to use his own power of discretion. For example, while describing ingredients of a recipe, the physician is advised to ignore the inappropriate ones according to his own discretion depending on a specific situation — vide *Vimāna* 8 : 149.)

(29) *Samuccaya* or specification

(Sometimes, the term *'ca'* meaning 'and' is used repeatedly after each item which imply all these items are to be taken together. For example, the term *'ca'* is used after *varṇa* (complexion), *svara* (voice), etc., in *Indriya* 1 : 3 to emphasise that all these items are to be considered together to determine the span of life of a person.)

(30) *Nidarśana* or illustration

(Sometimes, a topic is illustrated with similes in order to make it understandable by intelligent and unintelligent alike. For example, it is stated that the use of a drug with which the physician is well acquainted works like ambrosia — vide *Sūtra* 1 : 124.)

(31) *Nirvacana* or citation of analogy

(Sometimes, an example is given in order to facilitate easy comprehension of a topic by scholarly phisicians. For example, the causative factor for the anihilation of beings cannot be comprehended because such factors are unpredictable. This is on the analogy of 'time'. Time is always in the process of quick movement. It automatically goes on changing or destroying itself — *Sūtra* 16 : 32.

Nidarśana (item no. 30) facilitates comprehension of a topic by both intelligent and unintelligent physicians whereas *nirvacana* is exclusively for intelligent physicians.

The term *'nirvacana'* can also be explained as definition. For example, the disease *'visarpa'* is defined as the ailment which moves *(sarpati)* in different directions *(vividha)* — vide *Cikitsā* 21 : 11.)

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(32) *Saṃyoga* or injuction

[Cakrapāṇi has used the word *'niyoga'* in the place of *'saṃyoga'* mentioned in the text.]

(Sometimes a statement is made in order to emphasise absolute necessity. For example, it is stated that the patient (under going *jentāka* therapy) should not leave the bench even if he gets fainted owing to excessive heat — vide *Sūtra* 14 : 46.)

(33) *Vikalpa* or option

(Sometimes the author gives different options to the patient. For example, he has advised several alternative measures for the treatment of *madhu-meha* (diabetes mellitus) like the decoctions of *khadira* or *kuśa* — vide *Cikitsā* 6 : 46.)

(34) *Pratyutsāra* or rebuttal

(Sometimes the author quotes different views each refuting the other. For example, *vāryovida* is stated to hold the view that the diseases are caused by *rasa-dhātu,* and this view is refuted by Hiraṇyākṣa who holds the view that these are caused by six basic elements, viz., five *mahābhūtas* and the conscious element — vide *Sūtra* 25 : 13-15.)

(35) *Uddhāra* or reaffirmation

(Sometimes the author establishes his own view after refuting another scholar's view. For example, the statement that diseases are caused by the unwholesomeness of such factors, the wholesomeness of which is conducive to procreation — vide *Sūtra* 25 : 29.)

(36) *Sambhava* or possibility

(Sometimes the place of origin or the infrastructure of manifestation is to be judged from the ailment. For example, description of *piplu, vyaṅga, nīlikā,* etc., implies their location in the face.) [$41^{1}/_{2}$-$^{1}/_{2}45$]

[Along with the translation of the text, Cakrapāṇi's commentary in

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respect of each of the *tantra-yuktis* (canons of composition) is furnished after each item in parenthesis.]

Bhaṭṭāra-haricandra has described four additional *tantra-yuktis*, viz., *paripraśna, vyākaraṇa, vyutkrāntābhidhāna* and *hetu. Paripraśna* is included in *uddeśa* (no. 6), *vyākaraṇa* is included in *vyākhyāna* (no. 23) and *vyutkrāntābhidhāna* is included in *nirdeśa* (no. 7). *Hetu* (according to Cakrapāṇi) includes different premises (mode of acquiring knowledge), like *pratyakṣa* or direct observation — vide *Vimāna* 8 : 38-42.

In addition to the above mentioned 36 *tantra-yuktis,* there are fifteen types of *vyākhyās* or explanations, seven types of *kalpanā* or arrangements, twenty one types of *arthāśrayas* or implications, and fourteen *tantra-doṣas* or defects in composition. These are not mentiond here because of their description in *Uttara-tantra.*

[This is a significant statement. Unlike *Suśruta-saṃhitā* and *Aṣṭāṅga-hṛdaya, Caraka-Saṃhitā* has no *Uttara-tantra* or *Uttara-sthāna.* May be, in Cakrapāṇi's time this subsidiary text was available which is no more extant. This might alternatively be a subsequent interpolation in Cakrpāṇi's commentary.

There is a mention of *Uttara-tantra* in the text itself in verse no. 50. Cakrapāṇi himself has quoted the views of experienced physicians according to whom the text in verse no. 50 is unauthentic. But he himself has not refuted the authenticity of this text.]

Availability of Tantra-yuktis

तन्त्रे समासव्यासोक्ते भवन्त्येता हि कृत्स्नशः।।४५।।
एकदेशेन दृश्यन्ते समासाभिहिते तथा।

All these *tantra-yuktis* or canons of composition are adopted in their entirety in treatises which are composed in both aphoristic and expository styles. However, in treatises which are composed exclusively in aphoristic style, such canons are found only partially [$45^1/_2$-$^1/_2$46]

When a treatise is composed in aphoristic style, all these canons of composition are not adopted. Only a few of these canons are found in such concise texts.

Importance of Tantra-yuktis

यथाऽम्बुजवनस्यार्कः प्रदीपो वेश्मनो यथा।।४६।।

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प्रबोधनप्रकाशार्थास्तथा तन्त्रस्य युक्तयः।

As the sun causes blossoming of the lotus pond (lit. forest) and as the lamp enlightens the [dark] house, similarly the knowledge of these *tantra-yuktis* serves the purpose of awakening (blossoming) and enlightening of the physician.

[$46^1/_2$-$^1/_2 47$]

As the sun causes opening of a closed lotus, similarly *tantra-yuktis* (canons of composition) help the physician to understand in detail the aphoristic statements in a treatise. As a lamp helps in visualising the objects kept in a dark room, similarly *tantra-yuktis* like *hetu* (included in *yoga* or arrangement — vide item no. 2 under the verse no. $41\ ^1/_2$ - $^1/_2$ 45), etc., help the physician in understanding the hidden meaning of the statements made in the treatise.

Thus, these *tantra-yuktis* help in the exposition of the aphoristic statements, and in the understanding of the hidden meanings.

Assistance of Tantra-yuktis in Understanding Other Treatises

एकस्मिन्नपि यस्येह शास्त्रे लब्धास्पदा मतिः।।४७।।
स शास्त्रमन्यदप्याशु युक्तिज्ञत्वात् प्रबुध्यते।
अधीयानोऽपि शास्त्राणि तन्त्रयुक्त्या विना भिषक्।
नाधिगच्छति शास्त्रार्थानर्थान् भाग्यक्षये यथा।।४८।।

The physician who has good grasp even of only one treatise can also understand other treatises quickly because of his proficiency in *tantra-yuktis* or canons of composition. As a person fails to acquire wealth [in spite of his best efforts] when fortune deserts him, similarly one who is not conversant with *tantra-yuktis* (canons of exposition) does not understand the real implications of treatises even if he has studied many of them. [$47^1/_2$-48]

Proper and Improper Understanding of Treatises

दुर्गृहीतं क्षिणोत्येव शास्त्रं शस्त्रमिवाबुधम्।
सुगृहीतं तदेव ज्ञं शास्त्रं शस्त्रं च रक्षति।।४९।।
(तस्मादेताः प्रवक्ष्यन्ते विस्तरेणोत्तरे पुनः।
तत्त्वज्ञानार्थमस्यैव तन्त्रस्य गुणदोषतः)।।५०।।

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As a badly handled weapon destroys the person himself, similarly, a badly understood treatise causes harm to the user himself. On the other hand, as a properly handled weapon protects the user from the enemy, similarly the treatise well understood becomes a source of protection against the opponents.

Therefore, to enable the physician to critically anlyse the merits and demerits, and comprehend the real implications of statements in this treatise *(āyurveda),* these *tantra-yuktis* or canons of exposition will be explained in detail in the *Uttara-tantra* or supplementary section of this work. [49-50]

As a mishandled weapon may cause injury to the hand of the user, and such other demages, similarly a misunderstood treatise may cause harm to the physician himself because of wrong administration of medicaments. A weapon correctly handled may protect the person from attacks by docoits, etc. Similarly, a properly understood treatise may protect the physician and his patients from the attacks of diseases.

[The last two lines of this text regarding the elucidation of *tantra-yuktis* in *Uttara-tantra* or supplementary section is kept in parenthesis by the editor of the text. Perhaps, he considered this text to be of doubtful authenticity. Cakrapāṇi had these lines in the text which he commented upon. He has cited this text as approved by some physicians. He has also quoted the opinion of senior physicians who considered this text as unaunthentic because, according to them, no such *Uttara-tantra* or supplementary text is found in Agniveśa's work. Interestingly, while quoting the opinion of senior physicians, he himself has not refuted the authenticity of this text. In this connection a reference may also be made to his commentary on verse no. 41-44.]

Merits of Studying This Treatise

इदमखिलमधीत्य सम्यगर्थान्
विमृशति योऽविमनाः प्रयोगनित्यः।
स मनुजसुखजीवितप्रदाता
भवति धृतिस्मृतिबुद्धिधर्मवृद्धः।।५१।।

After studying this text in its entirety with appropriate meaning, the physician who has reflected upon the statements made in it with concentration of mind, who has applied the

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text constantly in practice, and who has developed the power of retention, recollection, description and righteousness becomes bestower of happiness and life (longevity) to human beings. [51]

Epilogue

(यस्य द्वादशसाहस्त्री हृदि तिष्ठति संहिता।
सोऽर्थज्ञः स विचारज्ञश्चिकित्साकुशलश्च सः।।५२।।
रोगांस्तेषां चिकित्सां च स किमर्थं न बुध्यते।
चिकित्सा वह्निवेशस्य सुस्थातुरहितं प्रति।।५३।।
यदिहास्ति तदन्यत्र यन्नेहास्ति न तत्क्वचित्।
अग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृते।।५४।।
सिद्धिस्थानेऽष्टमे प्राप्ते तस्मिन् दृढबलेन तु।
सिद्धिस्थानं स्वसिद्ध्यर्थं समासेन समापितम्)।।५५।।

The physician who has in his memory this treatise containing twelve thousand [verses and prose paragraphs] is verily the knower of its implications. He has the power of discrimination and he is proficient in the treatment of diseases. Such a person cannot fail to diagnose a disease and initiate its [appropriate] treatment.

The therapeutic measures described in Agniveśa's work are useful both for healthy persons [to maintain their positive health and prevent occurrence of diseases] and patients [to cure their disease].

Whatever [medical knowledge] is available elsewhere is included in this text, and whatever is not available here cannot be found elsewhere.

The treatise of Agniveśa as redacted by Caraka has reached up to its [final] eighth section called *Siddhi-sthāna*. For the accomplishment of this *Siddhi-sthāna,* the final touch in brief is given by Dṛḍhabala. [52-55]

[Eight lines of the text above are unauthentic according to Cakrapāṇi. Further, the above text is described here to be "*dvādaśa-sāhasrī,* i.e. composed of twelve thousand verses and prose paragraphs.

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Notwithstanding variations in the numbering of verses and prose paragraphs in the different editions of this work, the total number of the verses and prose paragraphs in 120 chapters does not exceed ten thousand which is significantly at variance with what is stated in the original text here. Apart from the possibility of an error in the statement made in the above text, it is likely that the original text had actually 12 thousand verses and prose paragraphs, and some of these were lost subsequently. Alternatively, this statement includes the number of verses and prose paragraphs of *Uttara-tantra* or *Uttara-sthāna* which is no more extant. Since the other two important ayurvedic classics, viz., *Suśruta-saṃhitā* and *Aṣṭāṅga-hṛdaya* have such supplementary sections, the possibility of *Caraka-saṃhitā* having such a supplementary section cannot be brushed aside, notwithstanding the confusing statements (acceptance and later refutation) in the existing editions of Cakrapāṇi's commentary.]

Colophon

इत्यग्निवेशकृते तन्त्रे चरकप्रतिसंस्कृतेऽप्राप्ते दृढबल-
संपूरिते सिद्धिस्थाने उत्तरबस्तिसिद्धिर्नाम
द्वादशोऽध्यायः ।। १२ ।।

Thus, ends the twelfth chapter of *Siddhi*-section dealing with "Measures to Attain Perfection in the Administration of *Uttara-basti* (Important Recipes of Enema)" in Agniveśa's work as redacted by Caraka, and because of its non-availability, supplemented by Dṛḍhabala.

[At the end, Cakrapāṇi has given geneological details.] His father's name was Nārāyaṇa Datta. He was the supervisor (medical advisor) of the kitchen, and Minister of the King (Naya-pāla) of *Gauḍa* kingdom (present Bribhum district West Bengal). His elder brother's name was Bhānu Datta, and he was the royal physician with the title *''Antaraṅga''*. They belonged to the reputed clan *'Lodhra-bali'*.

समाप्तमिदं चरकतन्त्रम्।

Thus, ends Caraka's treatise.

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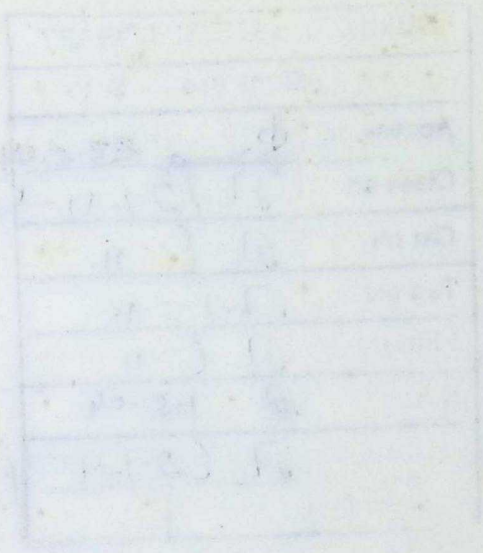

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